

**Affidavit**  
**Application To Clinical Or School Psychology Program**

Return application materials to:  
Western Kentucky University  
Office of Graduate Studies and Research  
1906 College heights Blvd., #11010  
Bowling Green, KY 42101-1010

Please review and sign the following affidavit:

With this affidavit and my signed Standard Graduate Application Form I hereby apply to the Clinical Psychology or School Psychology program at Western Kentucky University.

- G** I affirm that I have never been convicted or charged with a felony crime, or a crime involving harm against another person; and my check mark affirms this.
  
- G** If I have ever been convicted or even charged with such a felony, I have attached a separate letter of explanation. My check mark affirms that a separate letter of explanation is attached.

The faculty, at their discretion, may request or conduct criminal records background checks on students; and, I hereby agree to permit such a background check on me.

I recognize that falsification of any information or affirmation in this affidavit or my application form could result in immediate termination from the graduate degree program. Finally, I recognize that acceptance into the above programs does not assure program completion. The faculty will evaluate both cognitive and clinical skills in an ongoing process until graduation is achieved.

I understand that having a criminal background may result in my failure to be hired, certified or licensed as a psychologist or as a mental health professional.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

Witnessed By:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name