

Disclosure Statement Regarding Criminal Pleas/Conviction

Please complete one form for each plea or conviction, regardless of when the crime was committed or whether it was dismissed or expunged. All fields must be completed. FAILURE TO REPORT A PLEA/CONVICTION IS CONSIDERED FALSIFICATION OF THE APPLICATION AND MAY RESULT IN THE DENIAL OF LICENSURE.

Applicant Name:							
Arresting Agency:							
Plea/Conviction Date:				Court Case or Docket Number:			
Court Name and Location:				Violation Code(s):			
Sentence:		Please describe any Punishment imposed by the court.					
Incarceration Date:				Release Date:			
Probation/Parole Date:				Release Date:			
Fines (amount)		\$	Paid?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Restitution (amount)	\$
							Paid? Yes <input type="checkbox"/> No <input type="checkbox"/>
Details of Crime:		Please provide details of this crime, including a complete description of the facts and circumstances that led to your conviction. You should include who participated in the crime, who the victim was; what losses were suffered; and when, where and how the crime occurred.					
Explanation of Crime:		Please explain why you committed this crime:					
Rehabilitation Efforts:		What positive changes have you made in your life since this conviction? Please attach documentation to support the rehabilitation efforts.					
For Official BBC Use Only							
<input type="checkbox"/> Approved - Return to Evaluator/Continue Processing (Initial: _____) <input type="checkbox"/> Not Approved - Refer to Manager (Initial: _____)							