



## The University of Michigan School of Public Health

### ACADEMIC CONDUCT FORM

Please answer the following questions, sign this form and return it to the Office of Academic Affairs, School of Public Health, University of Michigan with your application supplements.

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Last Name

First Name

Middle

1. Have you ever been expelled, suspended, placed on probation, or been subject to any other disciplinary action at any secondary school or college you have attended?

No

Yes

2. Have you ever been convicted of a criminal offense other than a minor traffic violation, or been declared delinquent by a juvenile court, or are there such charges currently pending against you at this time?

No

Yes

**If you answered yes to either of these questions, please submit a statement of explanation along with this form.**

I certify that the information I have provided is true and complete. I understand that misrepresentation may be a cause for canceling my admission or financial award.

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Signature (required)

**Return to:** Office of Academic Affairs  
UM School of Public Health  
109 S. Observatory #3537  
Ann Arbor, MI 48109-2029  
Phone: 734-764-5425  
Web: [www.sph.umich.edu](http://www.sph.umich.edu)