

Confirmation form for disciplinary actions or other punitive measures due to reasons such as sexual harassment and sexual violence

Please check ( ✓ ) one of the following.

1.  No, I do not have any history of disciplinary actions.
2.  Yes, I have a history of disciplinary actions.

(Please provide specific details.)

I hereby testify that the above information is accurate.

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_