

OKLAHOMA STATE UNIVERSITY

Felony Admission Clearance

Name: _____

Other name(s) previously used: _____

Semester & Year Anticipated Start: _____ Phone: _____

Are you a registered sex offender? (circle) YES NO

Have you ever been incarcerated? (circle) YES NO

If yes: Place/s of incarceration: _____

Date of release: _____ Length of incarceration: _____

Status upon release: (circle) Probation Parole Other: _____

Beginning Date: _____ On Probation/Parole Until: _____

Probation/Parole Officer Information:

Name: _____ Phone: _____

Address: _____

All Previous and/or Pending Criminal Charges including date, location, and outcome

Date:	Location (City, County, State):
Charges	Outcome

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