

## Criminal Background Certification

The following are the questions that each candidate for licensure must answer. You may access the full information form the BON's website at [www.bon.state.tx.us](http://www.bon.state.tx.us)

1. Are you enrolled, planning to enroll, or have you graduated from a nursing program?

\_\_\_\_\_

Type of Nursing Program: (circle one) LVN ADN Diploma BSN

Date of Enrollment: \_\_\_\_\_

2. **Write Yes or No for any criminal offense, including those pending appeal: (Please answer in each space provided)**

\_\_\_\_\_ A. been convicted of a misdemeanor?

\_\_\_\_\_ B. been convicted of a felony?

\_\_\_\_\_ C. pled nolo contendere, no contest, or guilty?

\_\_\_\_\_ D. received deferred adjudication.

\_\_\_\_\_ E. been placed on community supervision or court-ordered probation, whether or not adjudicated guilty?

\_\_\_\_\_ F. been sentenced to serve jail or prison time? Court-ordered confinement?

\_\_\_\_\_ G. been granted pre-trial diversion.

\_\_\_\_\_ H. been arrested or have any pending criminal charges?

\_\_\_\_\_ I. been cited or charged with any violation of the law?

\_\_\_\_\_ J. been subject of a court-martial; Article 15 violation; or received any form of military judgment/punishment/action?

You may only exclude Class C misdemeanor traffic violations. You will need a declaratory order for arrests while a minor.

### **NOTE: Expunged and Sealed Offenses:**

While expunged or sealed offenses, arrests, tickets, or citations need not be disclosed, it is your responsibility to ensure the offense, arrest, ticket or citation has, in fact, been expunged or sealed. It is recommended that you submit a copy of the Court Order expunging or sealing the record in

question to our office with your application. Failure to reveal an offense, arrest, ticket, or citation that is not in fact expunged or sealed, will at a minimum, subject your license to a disciplinary fine. Non-disclosure of relevant offenses raises questions related to truthfulness and character.

**NOTE: Orders of Non-Disclosure:**

Pursuant to Tex. Gov't Code § 552.142(b), if you have criminal matters that are the subject of an order of non-disclosure you are not required to reveal those criminal matters on this form. However, a criminal matter that is the subject of an order of non-disclosure may become a character and fitness issue. Pursuant to other sections of the Gov't Code chapter 411, the Texas Nursing Board is entitled to access criminal history record information that is the subject of an order of non-disclosure. If the Board discovers a criminal matter that is the subject of an order of non-disclosure, even if you properly did not reveal that matter, the Board may require you to provide information about any conduct that raises issues of character.

1.  **Yes**  **No** Are you currently the target or subject of a grand jury or governmental agency investigation?
2.  **Yes**  **No** Has any licensing authority refused to issue you a license or ever revoked, annulled, cancelled, accepted surrender of, suspended, placed on probation, refused to renew a license, certificate or multi-state privilege held by you now or previously, or ever fined, censured, reprimanded or otherwise disciplined you?
3.  **Yes**  **No** \*Within the past five (5) years have you been addicted to and/or treated for the use of alcohol or any other drug?
4.  **Yes**  **No** \*Within the past five (5) years have you been diagnosed with, treated, or hospitalized for schizophrenia and/or psychotic disorders, bipolar disorder, paranoid personality disorder, antisocial personality disorder, or borderline personality disorder?\*

If “**YES**” indicate the condition:  schizophrenia and/or psychotic disorders,  bipolar disorder,  paranoid personality disorder,  antisocial personality disorder,  borderline personality disorder \*Pursuant to Occupations Code §301.207, information regarding a person’s diagnosis or treatment for a physical condition, mental condition, or chemical dependency is confidential to the same extent that information collected as part of an investigation is confidential under the Occupations Code §301.466. You may indicate “**NO**” if you have completed and/ or are in compliance with Texas Peer Assistance Program for Nurses (TPAPN) for substance abuse or mental illness.

**\*\*\*IF YOU ANSWER “YES” TO ANY QUESTION #2 - #6, YOU MUST PROVIDE A SIGNED AND DATED LETTER TO THE BOARD OF NURSING DESCRIBING THE INCIDENCE(S) THAT YOU ARE REPORTING TO THE BOARD, AS WELL AS SUPPORTING DOCUMENTATION. REFER TO THE INSTRUCTIONS PAGE FOR MORE INFORMATION.**

[https://www.bon.texas.gov/forms\\_declaratory\\_order.asp.html](https://www.bon.texas.gov/forms_declaratory_order.asp.html)

**Attestation**

I, the Petitioner referenced in this application, acknowledge this document is a legal document and I attest that the statements herein contained are true in every respect. I understand that no one else may submit this form on my behalf and that I am accountable and responsible for the accuracy of any answer or statement on this form. Further, I understand that it is a violation of the 22 TAC § 217.12 (6)(I) and the Penal Code, sec 37.10, to submit a false statement to a government agency; and I consent to release of confidential information to the Texas Board of Nursing and further authorize the Board to use and to release said information

as needed for the evaluation and disposition of my application.

I understand that if I have any questions regarding this affidavit I should contact an attorney or the appropriate professional health provider.

I will immediately notify the Board if at any time after signing this affidavit I no longer meet the eligibility requirements.