

GRCC Health Program Admissions Preliminary Background Check (Cost: \$10.00)

Last Name: _____ First Name: _____ Middle Name: _____

Driver's License Number: _____ State Issued: _____

Date of Birth: _____ Student ID #: _____

Have you ever been convicted of a crime(s)? This would include both felony and misdemeanor convictions.

Yes No

If yes, please explain the nature of the offense(s) and provide the date(s):

Do you have any pending criminal charges against you?

Yes No

If yes, please explain:

As a prospective health student of Grand Rapids Community College, I authorize the college campus Police Department to conduct a preliminary criminal history check prior to being placed on my program's waiting list. This will include a search through the Michigan State Police ICHAT. I affirm that all the above information is accurate and complete. I understand that any falsification, misrepresentation, or omission herein may result in refusal of being placed on my program's waiting list.

I give the Grand Rapids Community College Police Department permission to share any information received through the preliminary criminal history check with the Health Admissions office and/or the appropriate program directors.

I understand that before I begin my clinical rotation/fieldwork I will be submitted to a lengthier criminal history check, including being fingerprinted by the Grand Rapids Community College Police Department.

Signature: _____ Date: _____

You may choose to do one of the following in order to submit your completed preliminary background check form to the Grand Rapids Community College Police Department:

1) Conduct your own [ICHAT](#) online and email the results along with the Preliminary Background Check form to GRCC Health Admissions at healthprograms@grcc.edu.

2) Bring the Preliminary Background Check forms with \$10, cash or check, to GRCC Police or Health Admissions.

GRCC Police Department Use Only

Eligible for Admission: _____ Not eligible for admission based in criminal history: _____

Other with explanation: _____

Signature: _____ Date: _____ Paid: _____

