Dean’s Disciplinary Report Request Form

Please complete the top portion of this form, sign, and submit to your residential college Dean’s office.

**STATEMENT OF APPLICANT:** I request that this form be sent to the Health Professions Advisory Board of Yale University. It is further understood that I may not read this form, and that I will not seek to do so, either while I am enrolled at Yale, or subsequently. I understand that if I receive a penalty of Probation or more at any time, the Dean will so inform the Health Professions Advisory Board, and it, in turn, will so inform the medical schools to which I have applied.

Applicant Name: ____________________________________________________

College: ___________________ Class of: _________

Applicant’s Signature: ______________________ Date: __________________

**TO THE DEAN:** This form is important both to the student and to the reputation of Yale. Prompt completion of this form will be appreciated by both the applicant and the Board. Thank you very much for your help.

**PLEASE DO NOT COMPLETE THIS FORM UNTIL THE END OF THE SPRING TERM FOR A STUDENT CURRENTLY ENROLLED IN YALE COLLEGE.**

- Has the applicant ever been placed on probation, suspended, or expelled? ☐ YES ☐ NO

- Has the applicant ever been the subject of disciplinary charges that resulted in the applicant having a disciplinary record? ☐ YES ☐ NO

If the answer to either of the above questions is "Yes" please attach a letter fully explaining the circumstances. Please email this form to prostudies@yale.edu or mail to Health Professions Advisory Board, 55 Whitney Ave, 3rd floor, New Haven, CT 06510.

Dean’s name: ____________________________________________________

Dean’s email address: ____________________________________________

Dean’s Signature: ___________________________ Date: __________________

Yale Office of Career Strategy • 55 Whitney Avenue, 3rd Floor, New Haven, CT, 06510 • Online at: ocs.yale.edu