

**CRIMINAL RECORD BACKGROUND CHECK  
STUDENT RELEASE**

1. A *Criminal History Information Request* (CHI Request), including a *Sex Offender Registry* (SOR) check, is required for enrollment in the Bachelor of Science in Nursing for Registered Nurses (RN-BSN) program at Northeastern State University (NSU).
2. I agree that I am responsible for requesting and providing a satisfactory criminal background check report, including a SOR check.
3. I agree that I may be denied enrollment in or disqualified from continuing in the RN-BSN program for failing to timely make a CHI Request that includes a SOR check, for failing to timely provide an original copy of the background check report(s), or for presenting a background check report that reveals criminal history and/or registration as a sex offender.
4. By signing below, I give my permission to Northeastern State University to release the results of my criminal history/background and sex offender registry check(s), including any documentation or information incidental thereto, to any clinical facility for the purpose of securing field experience (clinical training) for me.
5. I hereby fully release and discharge Northeastern State University, its officers, administrators, board members, employees, instructors, agents, assigns, contractors, insurers and attorneys, as well as any and all clinical facilities, their officers, administrators, boards members, employees, instructors, agents, assigns, contractors, insurers and attorneys, and each of them, from any and all claims, liability, or causes of action for damages, known or unknown, arising out of or relating to any investigation of my background and the release of information obtained through that investigation.

Date: \_\_\_\_\_ Student Signature: \_\_\_\_\_

Print Full Name: \_\_\_\_\_