

# Clark Atlanta University - Office of International Programs

## CLEARANCE FORM

The completion of this form is necessary for approving the student applicant for participation in the Clark Atlanta University Student Abroad Program.

Name of Student Applicant: \_\_\_\_\_  
Last First Middle

Student ID#: \_\_\_\_\_  
900# City State Zip

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Department: \_\_\_\_\_ Estimated Travel Dates: \_\_\_\_\_

The Family Educational Rights and Privacy Act of 1974 (FERPA), as amended, guarantees confidentiality of the student's educational records. As a student applying for participation in an International Program and understanding my rights under FERPA, I authorize the Director of Student Conduct/Student Affairs, to release all information as it pertains to my conduct and code of behavior at Clark Atlanta University.

Signature of Student Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

### **TO THE DIRECTOR OF STUDENTS CONDUCT:**

**THE STUDENT NAMED ABOVE HAS APPLIED FOR THE PARTICIPATION IN A UNIVERSITY INTERNATIONAL PROGRAM. WOULD YOU PLEASE COMPLETE THE INFORMATION BELOW AND RETURN THE TO THE OFFICE OF INTERNATIONAL PROGRAMS. YOUR ASSISTANCE IS GREATLY APPRECIATED.**

1. Has this student ever been suspended from CAU? Yes \_\_\_ No \_\_\_

If yes, please explain briefly \_\_\_\_\_

2. Has this student been subject to any academic (dishonesty) or non-academic disciplinary action?

Yes \_\_\_ No \_\_\_

If yes, please explain briefly \_\_\_\_\_

3. Is this student currently under any disciplinary action? Yes \_\_\_ No \_\_\_

If no, please explain briefly \_\_\_\_\_

Signed: \_\_\_\_\_ Name: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_