

Dean's Disciplinary Report Request Form

Your Health Professions Evaluation cannot be prepared until the Dean's Disciplinary Report is received. 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 with the understanding that it may be used in preparing my Health Professions Evaluation. 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:

in regard to personal qualifications for medical school and the practice of medicine.

Applicant's Signature _____ Date: _____

TO THE DEAN: Your comments may be used in the preparation of the Yale University Health Professions Advisory Board Evaluation of this student. The importance of this form both to the student and to the reputation of Yale cannot be over-emphasized. Prompt completion of this form will be appreciated by both the applicant and the Board, because our evaluation cannot be prepared until this report is received. 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: _____