As of August 12, 2005, the Texas Tech University System Board of Regents approved a policy requiring that Texas Tech University Health Sciences Center (TTUHSC) obtain criminal background checks for students/trainees and residents in the various clinical training programs in order to protect healthcare patients. Affiliating institutions that provide training to TTUHSC students/trainees and residents have routinely begun requiring affiliated healthcare training programs such as TTUHSC to comply with requirements imposed on their employees by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). Thus, TTUHSC is not able to place trainees at these institutions unless our students/trainees and residents have undergone a criminal background check (CBC). The CBC will be used to determine eligibility, character and fitness for meeting the educational, training and licensure requirements, where applicable, of the respective healthcare professions. The cost for performing any and all CBC(s) will be the responsibility of each student. The information regarding criminal history records information will be obtained via the student's self-disclosure and a background check conducted by an outside vendor. This confidential information will be provided to TTUHSC and submitted only to those persons with a legitimate need to know. Refusal to consent to a criminal background check as and when deemed necessary by the respective TTUHSC School or Graduate Medical Education program will preclude the student from continuing his/her education or training at TTUHSC, i.e., will result in immediate dismissal of those persons already matriculated/enrolled and will cause TTUHSC to withdraw its offer of admission to applicants who have not yet matriculated/enrolled.

I have read this document and understand its implications, and further agree that I will be required to undergo a mandatory criminal background check. I understand that any determination of ineligibility for participating in clinical training, as determined by the specific education/training program in which I am enrolled/assigned, will result in dismissal from TTUHSC.

________________________________________
NAME (printed)

_________________________   ________________
SIGNED                  DATE