

PARTICIPANT SECTION

I authorize _____ to release details of my disciplinary records to
UMKC. Home Institution

Additionally, I understand that should my disciplinary status change prior to the start date of my program, that I am responsible for notifying UMKC immediately as this may impact my participation on this program.

Participant Name (Please Print)

Name and Term of Program

Participant Signature

Date

HOME INSTITUTION SECTION

This section is to be completed by Student Affairs or your Study Abroad Office. If your home Institution does not have a Student Affairs Office, then a Dean or VP of Academic Affairs, or the equivalent, may complete this.

Please check the appropriate section below:

I have verified that the applicant's record **DOES NOT** make mention of any previous disciplinary problems, including warnings or probation.

I have verified that the applicant's record **DOES** make mention of previous disciplinary problems, including warnings or probation. (If permissible, please provide an explanation of the circumstances.)

Home Institution Official's Name (Please Print)

Home Institution Official's Signature

Date

Title

Email Address

Phone Number

University of Missouri — Kansas City
International Academic Programs
5000 Holmes Street
Kansas City, Missouri 64110
816.235.5759 | international@umkc.edu