Winthrop University

Self-Disclosure Form Regarding Pending Offense and Conviction

This form must be completed by current/prospective employees and any individuals (paid or unpaid) who are engaged by Winthrop University in any work capacity, including students and volunteers who will be in the proximity of minor children, vulnerable adults or in positions that are safety and/or security sensitive, or other similar positions for any of the following reasons:

- To provide written reporting and self-disclosure of any pending offense or conviction of a misdemeanor or felony within three (3) days after a pending offense or conviction (DUI, DWI, and Driving under Suspension are required to be reported; minor traffic citations are not required to be reported). Failure to disclose pending offense and conviction information shall be considered as non-compliance and subject to disciplinary action, up to and including termination.
- For those allowed to begin employment or service before the results of the background check have been received by Winthrop University. Employees who are conditionally hired into positions at Winthrop University before the background check results are obtained, and whose background check reveals information inconsistent with the information reported on this form, may be terminated from their position immediately upon the University's receipt of the inconsistent information from the background check vendor.
- For those rehired or reinstated after a break of one year or less of previous employment or service. Winthrop University will conduct a new background check for those who are rehired or reinstated if the break in service is more than one year.

Full Legal Name:		Date of Birth:
(Last)	(First)	(MI)
Any other names which you have used	or by which you have been	identified (include maiden name):
Winthrop CWID Number (if current em	nployee):	Employing Department:
completion of my most recent Winthroexperienced a break in service of one yamber by checking this box, I understan experienced more than a one year breaking this box, I understand Further, I understand that if the information that would deem me to be incompatibely checking this box, I report that I and other individuals who had a backwith Winthrop University (whether paranotify the Office of Human Resources)	op University background che year or less should certify he d that as a new hire at W eak in service, a background of that my hire, rehire, or reins mation received from the back ele for employment in my post have been convicted of a maground check at the time of id or unpaid) are, within thr as required in the Winthrop	ny misdemeanor or felony or have no pending offenses since the leck clearance. (Those who are rehired or reinstated and have ere.) Winthrop University or as a rehire or reinstated volunteer who has check will be conducted. I state that I have not been convicted of any statement is conditional based on the results of the background check. Inckground check includes information which results in a determination esition at Winthrop University, my employment will be terminated. In insidemeanor or felony or have pending offenses. (Current employees of employment or at the beginning of the representatives' relationship tree days of knowledge of a pending offense or conviction, required to University Background Check Policy.) I am specifying below the crime ate, the location of the conviction, and the applicable court.
herein, including, without limitation, a	ny failure to accurately repo	m are true, correct, and complete. I understand that false statements ort any pending offense or conviction of a misdemeanor or felony will as well as possible criminal prosecution.

Employee Signature: _____

WINTHROP UNIVERSITY

Employee Certification

South Carolina Code 59-111-50 (Cum. Supp. 1980) prohibits State employment to persons who have willfully defaulted on student loans. Accordingly, the following certification must be completed as part of the pre-employment process. **Check all that apply**:

	that apply:		
	 I certify that I am not in default on any of the following types of loans: National Direct Student Loan National Defense Student Loan Guaranteed-Federally Insured Student Loan Nursing Student Loan 		
	 Health Professions Student Loan Law Enforcement Educational Loan 		
	nderstand that should I become in default on any of the above loans, State will preclude my continued or future employment with the University less I voluntarily enter into and honor an agreement under which terms the bt will be repaid and the lender provides written confirmation of the reement to the University.		
	□ I am currently in default on one or more of the above loans. I understand that State law prohibits my employment until I voluntarily enter into and honor an agreement after default under which terms the debt will be repaid and the lender provides written confirmation of the agreement to the University. I also understand that my participation in the agreement described above will not prejudice my employment by the University.		
Pri	nt Name		
Sig	nature Date		