**FACULTY OATH AND AFFIRMATION**

I, as a faculty with the Florida Atlantic University Christine E. Lynn College of Nursing, swear that I have not been arrested or charged with any crime or misdemeanor since the date of my previous background checks.

On Date of VerifiedCredentials.com check/CertifiedBackground.com check

On Date of FDLE Check (fingerprinting)

On Date of FBI Level II Check (fingerprinting)

I understand that the disclosure of arrest and/or conviction information could result in my termination from the Nursing Program.

Printed or Typed Name of Applicant Signature of Applicant

State of Florida,

County of

Sworn to (or affirmed) and subscribed before me this day and personally appeared

Principal (i) I, have personal knowledge of the identity

of the principal(s), or (ii) I, have seen satisfactory evidence of the principal(s) identity, by current state or federal identification with the principal(s) photograph in the form of a

or a (iii) credible witness has sworn to the identity of the principal (s).

Witness my hand and official seal or stamp, the day of , in the year

(seal or stamp)

Notary Public Official Signature

My Commission Expires Notary Printed or Typed Name