

<i>If you answer yes to any of the following questions, you must submit an explanation on a separate sheet.</i>	Yes	No
Are you presently charged with, or have you ever been convicted of or found guilty of or pled <i>nolo contendere</i> to, any felony or a misdemeanor which relates to the care, health or safety of children or other individuals? Examples include but are not limited to: sexual or other abuse of a patient or child, rape, crimes of violence, possession/use/sale of a controlled substance.		
Have you ever been disciplined by a state board or a health care or child care professional association, or are you presently being disciplined by such an entity?		
Do you or have you during the past three years habitually used alcohol or any drug or substance or had a physical or mental condition which would impair competent and objective professional performance of child life services and/or jeopardize public health and safety?		

**You must agree to these statements of understanding with your digital signature below.**

- I attest that the information in this application is true and accurate to the best of my knowledge.
- I understand that if requested from the general public, CLCC will confirm my certification status (active, expired, never certified), effective/expiration dates, and identification number.
- I understand that CLCC reserves the right to verify any information I have provided in this application.
- I understand that my application and verification documents become the property of CLCC and will not be returned.
- I understand that my examination results will be released only to CLCC and me.
- I understand that aggregate data will be used for statistical study and review of the examination process.
- I have read, understand and agree to abide by the ethical, security, confidentiality and other policies detailed in the Candidate and Recertification Manuals.
- I have read, understand and agree to abide by the Child Life Code of Ethics and the Social Networking Guidelines found on the ACLP website.
- I understand that when faced with an ethical decision of two conflicting institutional policies regarding social media, I will adhere to the policy that maintains the higher standard.
- I have read and understand the conditions under which my certification can be revoked.
- I acknowledge that I will receive certification-related emails and may not opt out.

**Please sign to confirm that you have read and agree to the above Statements of Understanding:**

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*Signature* *Date*

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*Printed Name* *ID#*