

# CAE Exam Application Felony Disclosure Form

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Applicant Name

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E-mail address

Telephone number

1. Other/Additional name(s) under which conviction(s) are filed (such other information as may be required):

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2. Location(s) where conviction(s) are filed:

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3. Court(s):

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4. Charge(s):

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5. Disposition/Sentence(s):

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6. Current Status of Sentence(s):

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7. Employer(s) at the time of conviction(s), if any:

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Name of Organization

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Street

City

State

Zip Code

8. Disclosure whether a professional license or certificate was denied, revoked, nullified, suspended, or surrendered in relation to disclosed conviction(s):

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9. Any other facts you consider important relative to the conviction(s) by attaching additional page(s) if needed.

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10. Please provide a short statement addressing your fitness for certification (attach an additional page if necessary):

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A copy of the court order showing the terms of the sentence(s) and documents showing completion of those terms is attached.

I understand and, by my signature, attest that the above information is true and accurate. I understand that any false statement or misrepresentation that I may make on this form may result in the revocation of my CAE Exam application.

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Applicant Signature

Date