



## **Criminal Conviction(s) - Reporting Instructions**

### **I. REPORTING**

It is your responsibility to demonstrate to the Board's satisfaction that you have been sufficiently rehabilitated to merit the public trust. It is in your best interest to follow all directions carefully, submit all required documents, and provide complete answers to all questions.

**What types of convictions must be disclosed?** You are *required* to report the following convictions:

1. Any felony crime.
2. Misdemeanor crimes against persons.

You must report these convictions even if they did not occur in Kansas or did not appear on a background check. You DO NOT have to report pending charges or expunged or pardoned convictions.

**Why do I have to report my conviction(s)?** By law, the Behavioral Sciences Regulatory Board (Board) may consider any conviction(s) for any felony and/or a misdemeanor crime against persons in deciding whether to refuse to issue, renew, or reinstate a license.

### **II. REQUIRED DOCUMENTS**

If you have a conviction(s) for any felony crime and/or misdemeanor crime against persons, the Board requires you to submit the following documents in addition to all application materials:

- Conviction **Disclosure form**
- Conviction **Monitoring form** (*if you are currently on probation, parole, or post-release supervision*)
- Proof of Completion of or Release from Probation, Parole, or Post-Release Supervision (*if applicable*)

**The licensure application, all required supporting documents, conviction forms, and court documents shall be sent to the Board in the same envelope.**  
**Incomplete submissions will be returned.**

**What is the Conviction Disclosure form?** This form provides the Board with information about your conviction(s) in enough detail to permit the Board to make a decision regarding your application for licensure.

**What is the Conviction Monitoring form?** This form provides the Board with information regarding your conviction from the monitoring agency. If you are currently serving probation, parole or are on post-release supervision, you must have your monitoring agency complete this form.

**How do I obtain court documents?** Court documents may be obtained at the Courthouse from the Clerk of the Court in the County of conviction. If, for some reason, the documents are unavailable, you must provide a letter from the Court stating the documents are not available.

**What if my conviction was in another state?** It may take some time to obtain your court documents. Most states require that you submit your request in writing along with the payment to obtain records.

### III. REVIEW PROCESS

**What does the Board consider when determining whether to grant a license? If an applicant has been convicted of a felony crime or a misdemeanor crime against persons, the** Board must determine whether you have been sufficiently rehabilitated to warrant the public trust. In making this determination, the Board may consider the following factors:

- a. The seriousness and nature of the offense
- b. Any aggravating or extenuating circumstances
- c. The time since the offense occurred
- d. Restitution to the victim, if applicable
- e. Employment, education, treatment, community service
- f. Your present moral fitness
- g. Your consciousness of wrongful conduct
- h. Your age/maturity at the time of offense
- i. Your present competence/skill
- j. Whether the crime was an isolated or recurring incident

**What happens next?** When the Board office receives all application materials, forms, and court documents, your file will be presented to the full Board for review and a determination of your application. The Board may do one of the following:

- a. Issue a license,
- b. Issue a license with conditions or limitations, or
- c. Deny the issuance of a license.

### IV. IMPORTANT INFORMATION ABOUT THIS PROCESS

**When does the Board meet?** The Board meets on the second Monday every other month, in odd months. Therefore, it is very important you submit all required materials for both the application and any convictions, in the same envelope to avoid a delay in your application review. The Board will not consider an incomplete application.

**Who should I contact for information about my application for a license?** When the application is in the initial review process to determine eligibility of standard license requirements, you will contact the Licensing Specialist that specializes in your profession. Once your application has been initially reviewed and is scheduled to be presented before the full Board, staff are unable to answer any questions. **Staff cannot answer any questions regarding convictions, expected outcomes, etc.**

***By law, for any applicant with a felony conviction, the Board may only issue the license by a 2/3 majority vote. This means 8 of 12 Board Members must vote in favor of licensing.***

Again, it is very important to remember, it is **your** responsibility to demonstrate to the Board's satisfaction that you have been sufficiently rehabilitated to merit the public trust. It is in your best interest to follow all directions carefully, submit all required documents and forms, and provide complete answers to all questions regarding your conviction.

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David B. Fye, JD, Executive Director

Laura Kelly, Governor

### Criminal Conviction - Disclosure Form

#### I. APPLICANT INFORMATION

Legal Name: \_\_\_\_\_  
                                First Name                                      Middle Name                                      Last Name

Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_  
                                Street Address                                      City                                      State                                      ZIP

Phone: \_\_\_\_\_                                      Cell Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_                                      License No. (if applicable): \_\_\_\_\_

#### II. CASE INFORMATION (Attach additional sheets if necessary)

COURT NAME	CASE NO.	CRIME - CONVICTION(S)	ATTACH THE FOLLOWING:
			<input type="checkbox"/> Complaint <input type="checkbox"/> Journal Entry of Sentencing <input type="checkbox"/> Proof of Completion of Probation/Parole/Supervision (if applicable)
			<input type="checkbox"/> Complaint <input type="checkbox"/> Journal Entry of Sentencing <input type="checkbox"/> Proof of Completion of Probation/Parole/Supervision (if applicable)
			<input type="checkbox"/> Complaint <input type="checkbox"/> Journal Entry of Sentencing <input type="checkbox"/> Proof of Completion of Probation/Parole/Supervision (if applicable)
			<input type="checkbox"/> Complaint <input type="checkbox"/> Journal Entry of Sentencing <input type="checkbox"/> Proof of Completion of Probation/Parole/Supervision (if applicable)

#### III. CASE STATUS

Are you currently on probation, parole, or post-release supervision	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> NA
When did you complete probation, parole or post-release supervision?			<input type="checkbox"/> NA
Have you paid all court ordered restitution?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> NA
Have you completed all court ordered treatment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> NA

Was your probation, parole, or post-release supervision ever revoked? If so, please explain.

If you have not paid all court ordered restitution and / or completed all court ordered treatment, explain why.

**IV. EXPLANATION OF CRIME**

For each of your convictions, explain why and how you committed the crime. Also, explain any special circumstances that you would like the Board to know regarding the crime.

Do you take full responsibility for the crime?  Yes  No If you answered no, please explain your reasons below.

**V. REHABILITATION**

**Explain what you steps or actions you have taken to rehabilitate yourself since your arrest or conviction. Examples include attending or completing treatment and/or therapy, education, community or volunteer activities, and employment, etc. You may also attach letters of recommendation from persons who have knowledge of your conviction and your current lifestyle.**

**Explain why the Board should grant your request for a license.**

**VI. CERTIFICATION**

I declare under penalty of perjury of the laws of the State of Kansas that the information contained herein is true and correct. I understand providing false information may constitute grounds for denial of my application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date Signed

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## Criminal Conviction(s) - Monitoring Form

### I. INSTRUCTIONS

You must submit this form if you are currently on probation, parole, or post-release supervision. Complete the Authorization to Release Confidential Information portion of this form and give to your monitoring agency to complete the rest.

### II. AUTHORIZATION TO RELEASE CONFIDENTIAL INFORMATION

I hereby authorize \_\_\_\_\_ (Name of Monitoring Agency) to release confidential information in its records, possession, or knowledge, regarding the status of my case(s), to the Kansas Behavioral Sciences Regulatory Board. This information will be used to determine if the Kansas Behavioral Sciences Regulatory Board should grant my request for a license.

Court Name: \_\_\_\_\_

Case No.: \_\_\_\_\_

Court Name: \_\_\_\_\_

Case No.: \_\_\_\_\_

Type or Print Clearly in Ink:

Defendant's Legal Name: \_\_\_\_\_  
First Middle Last

Defendant's Signature \_\_\_\_\_

Date Signed \_\_\_\_\_

### III. MONITORING AGENCY INFORMATION: Please print

Monitoring Agency \_\_\_\_\_

Name of Monitoring Officer \_\_\_\_\_

Email Address \_\_\_\_\_

Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

#### Case Information

- Date monitoring began: \_\_\_\_\_.
- Date monitoring scheduled to end: \_\_\_\_\_.
- Was the applicant the principal or an accessory:  Principal  Accessory
- Was the crime premeditated or spur of the moment?  Premeditated  Spur of the moment
- Were there damages or injury to the victim?  Yes  No
- Did the applicant make restitution to the victim?  Yes  No

**Compliance Status**

- Compliant as of this date with all terms and conditions of monitoring and revocation is pending.
- Non-compliant on this date with terms and conditions of monitoring as follows:

**Comments**

**IV. REFUSAL TO COMPLETE FORM**

I am unable to complete this form or to disclose any information regarding the defendant for the following reasons.

**V. CERTIFICATION**

\_\_\_\_\_  
MONITORING OFFICER'S SIGNATURE

\_\_\_\_\_  
DATE SIGNED