



# SUSPENDED OR REVOKED LICENSE EXPLANATION FORM

## TO BE COMPLETED BY APPLICANT

If your nursing license has ever been revoked or suspended, please explain the circumstances in the space below. If you checked the "revoked/suspended license" option on your application form, your application will not be considered complete until this form is submitted.

Please mail completed form to the Application Records Center (see address above)

Social Security Number

X	X	X	X	X					
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Name

LAST

FIRST

M.I.

MONTH

DAY

YEAR

## EQUAL OPPORTUNITY

employment, such as Title VII of the Civil Rights Act and Federal Executive Order #11246. Boston College's policy of equal education opportunity is in compliance with the guidelines and requirements of Title VI of the Civil Rights Act, Title IX of the Higher Education Amendments Act of 1972, and Section 504 of the Rehabilitation Act of 1973.