

# Felony Conviction Form

SHRM has a responsibility to protect the public, and a primary objective is to ensure that SHRM certification is not issued to applicants who have serious criminal convictions substantially related to the practice of HR. For this reason, SHRM evaluates all felony convictions in the same manner.

All applicants, as part of the application process, are required to report all felony convictions. "Conviction" includes a plea of no contest and any conviction that has been set aside or deferred. Convictions must be reported even if they have been expunged. Failure to report prior convictions is considered falsification of an application and is grounds for denial of an application.

When reporting convictions, applicants are required to provide a complete explanation of the underlying circumstances. Additionally, applicants may attach supporting documentation to their portal or may be asked to provide additional documentation. The SHRM Certification Team evaluates each application with any reported convictions on a case-by-case basis to make a determination concerning the applicant's ability to practice with safety to the public. Included in the evaluation is the nature and severity of the offense, additional subsequent acts, recency of the crime, compliance with sanctions, and evidence of rehabilitation.

SHRM considers factors such as the nature and severity of the crimes, the amount of time that has passed since the convictions, and any evidence of rehabilitation submitted by the applicant.

I, the undersigned applicant, attest that the information concerning notification of felony convictions has been reviewed by me and the following information furnished is true to the best of my knowledge.

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FULL LEGAL NAME

DATE OF BIRTH

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ANY FORMER NAMES BY WHICH YOU HAVE BEEN IDENTIFIED

Please specify in the space below (and provide supporting documentation as appropriate) the details of offense(s) for which you have been convicted, including the date and location of the offense, whether you were incarcerated, and whether you have completed any probation or parole requirements including evidence of rehabilitation (as appropriate):

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SIGNATURE

DATE