

DEAN'S CERTIFICATION REQUEST FORM

800 W. Peltason | Irvine, CA 92617-5135 | conduct@uci.edu | (949) 824-1479

Full Name: _____

UCI ID #: _____ UCI E-Mail: _____

Due to changes in operations as a response to COVID-19, Dean Certifications will be processed at no cost. This policy is subject to change at any time.

Submit the following for your Dean's Certification Request:

- Completed Dean Certification Request Form (this form) by email to conduct@uci.edu
- Attach other institution's form to be completed or specify a letter needs to be generated

Please legibly list each school you are requesting to have a certification sent to below and the method of submission. If you need to list more, use page 2.

	University Name	Email Address (Preferred) or Mailing Address	Form to be completed <small>(Common App/Coalition App/Letter/etc.)</small>
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I hereby waive my privacy rights (pursuant to the Family Education Rights of Privacy Act of 1974), and authorize the Office of Academic Integrity and Student Conduct, University of California, Irvine to release and/or discuss information regarding my student conduct records to the institutions listed above.

Your Signature: _____ Date _____

For Office Use Only:	
Form(s) Received: <input type="checkbox"/> In Person <input type="checkbox"/> Via Mail	Record Status: <input type="checkbox"/> No Record Found
Date Received by SLL: _____	<input type="checkbox"/> Record(s) Found:
Staff Name: _____	<input type="checkbox"/> Form(s) Attached
	<input type="checkbox"/> Generate Letter(s)
Payment Type: <input type="checkbox"/> Cash	Date Document Sent: _____
<input type="checkbox"/> Money Order #: _____	Staff Name: _____
Payment Amount: _____	

	University Name	Email Address (preferred) or Mailing Address	Form to be completed (Common App/Coalition App/Letter/etc.)
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