

UNIVERSITY OF SINT EUSTATIUS
SCHOOL OF MEDICINE



POLICE CLEARANCE SAMPLE LETTER

Every student must have a Police Clearance Letter in order to enter the clinical medicine phase of the program. The letter must be dated, be on the police departments letterhead and stating a 5-year “clear” history. Please submit the original letter to the New York office either by mail or fax. The following is a template of a letter you will request from your police department.

(POLICE DEPARTMENT LETTERHEAD)

Date:
To: Clinical Department
University of Sint Eustatius School of Medicine
6901 Jericho Turnpike
Suite 215
Syosset, NY 11791

The individual named below has applied to our office for a “Police Clearance” as part of his/her requirement in order to complete his/her clinical rotations for medical school at the University of Sint Eustatius School of Medicine.

Name _____ Social Security Number ____ / ____ / ____

Address _____

A review of our records indicates that to the best of our knowledge, this individual has no outstanding warrants and no arrest record which would prevent him/her from completing clinical medical training.

Signature of Police Official

Name & Title of Authorizing Officer