

(954) 771-6900 dci@deception.com

The International Academy of Polygraph

APPLICATION

		Mr.										
		Mrs.										
1.	(a)	Miss Soc. Sec. #										
	(b)	First		ddle	` .	Last						
	(0)	Other names us	sed (including maide	in name	Firs	at	Midd	lle				
					1 113	51	What	iic				
2	(a)	Home Phone		C	ell Phon	_ *		Fmail				
۷.	(u)											
	(b)	Present addres										
	Record last three places of residence or places of residence for past two years:											
	Dates resided											
(from / to) Complete address (Number, Street, City, State)												
		· ·										
		· · · ·										
2	(a)	Data of hinth:			n	lace of hinth.						
5.	(a)				r						1	
	(b)	Marital status: If married, state full name of spouse :										
4.		List three personal references OTHER THAN RELATIVES OR PRESENT OR PREVIOUS EMPLOYERS:										
	Name: Occupation:											
		Address City	State & Zin									
		riduress, erty, i	State & Zip:								1.1	
	Name: Occupation:											
	Address, City, State & Zip:											
		Name				Occupation						
		Address, City, State & Zip:										
		•	- <u></u>									
5.		Education:										
	Name of high school Address (city, State, Country) Yearsattended (F								ded (From/t	o) .	Graduate	
												Yes
											No	
	COLLEGE OR UNIVERSITY STUDY Do not claim any degree not vet conferred. Do indicate status of study (and degree) now in progress.											
				Subject		Years attended	Degree	Date	Grade or		Number of	
		Name and location of	of college or university	Major	Minor	From / To	Received	Received MO/DA/YR	Point Average	Sem./(Qtr. (specify)	
	3	1.								1.04131		
	6	2.										
),	3.										

6. EMPLOYMENT HISTORY: (past 5 years beginning with the most recent)

	Employer:	A	0	_ Position:						
				_ Date hired:						
				_ Date terminated:						
	Reason for leaving:									
	Employer:			Position:						
	Address:			_ Date hired:						
	City:	State:	Zip:	_ Date terminated:						
	Reason for leaving:									
	Employer:			Position:						
				Date hired:						
				_ Date terminated:						
	Reason for leaving:									
7.	Have you ever been convicted of a felony: If yes, give full particulars:									
Certification The facts set forth above in my application for membership are true and complete. I understand that if my application is accepted, false statements on this application shall be considered sufficient cause for termination. You are hereby authorized to make any investigation of my personal history and credit record through any investigative agencies of your choice. I authorize the release of any and all records & information concerning me. I further authorize any firm, person or governmental agency to release any requested information and I release from liability any person who furnishes information in connection with this form. A copy of this form shall be as valid as the original.										
				I do swear (or affirm) that the information contained herein is true and correct to the best of my know- ledge and will consent to a polygraph test if requested, to verify this information.						

Sworn to and subscribed before me at

this the _____ day of _____

20____.

Signature of applicant