



# SOUTH TEXAS COLLEGE POLICE ACADEMY



## PRE-ACCEPTANCE POLYGRAPH BOOKLET

FULL LEGAL NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

LAST FOUR SSN: \_\_\_\_\_

DRIVER LICENSE NUMBER: \_\_\_\_\_

POSITION APPLIED FOR: \_\_\_\_\_

IF YOU HAVE EVER TAKEN A POLYGRAPH EXAMINATION BEFORE, PLEASE  
GIVE THE DATE AND REASON FOR THE EXAMINATION BELOW.

DATE

REASON (BE SPECIFIC)

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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DO NOT WRITE BELOW THIS LINE

EXAMINER: \_\_\_\_\_ DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

CONTACT  
NUMBER: \_\_\_\_\_

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**GO TO THE NEXT PAGE.**

The information contained in this booklet is an integral part of your application process for the polygraph examiner and the background investigator.

**\*\*\*PLEASE READ CAREFULLY FOR COMPLETE UNDERSTANDING\*\*\***

**We realize that it would be a rarity for any applicant to not have any mistakes or personal indiscretions in their past, so we place a high degree of value on your honesty and integrity in answering the following questions truthfully.**

We ask that you be completely honest in each and every area of this booklet. In reference to the area of work history, the term “reprimand” refers to any written reprimands or actions more severe. In the areas of criminal activity and illegal drugs, the polygraph examiner understands that there may be information you are reluctant to provide or apprehensive to disclose. Regardless, your failure to provide any information in these areas will definitely have an adverse impact on the results of your polygraph examination. Do not minimize, alter, or exclude any details about any information in this booklet. If you are uncertain about a particular issue in any of these areas specific to your situation, error on the side of caution and include the information about that issue. The polygraph examiner is authorized by this Department to ask any and all questions relating to the information in this booklet. During the polygraph examination, you will have an opportunity to give an explanation on any and all information you disclosed. In reference to the areas involving family, education, finances, personal history and references please be as detailed and accurate as possible. This will help in your background investigation. The information that you provide in the forthcoming pages is completely confidential and will only be viewed by the polygraph examiner, the background investigator, and other commissioned members of the Departmental chain of command for review and hiring purposes. This booklet can only be filled out by the applicant. The applicant can be disqualified for allowing someone else to fill out the booklet.

Instructions: Answer all questions completely. If the question is not applicable write "N.A." Write "UNKNOWN" only if you do not know the answer and cannot obtain the answer from personal records. Booklets with blank areas will not be accepted.

Position applied for Police Cadet

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## PERSONAL BACKGROUND

1 Full Name \_\_\_\_\_  
(First) (Middle) (Last)

Other Names (Aliases, maiden names, nick names, etc.) \_\_\_\_\_

2 Residence Address \_\_\_\_\_  
(Street and Number) (City) (State) (Zip)

Mailing Address \_\_\_\_\_  
(Street and Number) (City) (State) (Zip)

Office Address \_\_\_\_\_  
(Street and Number) (City) (State) (Zip)

3 Home Telephone: ( ) Office: ( ) Cellular: ( )

4 E-mail Address \_\_\_\_\_ Social Media sites, add at bottom of page \_\_\_\_\_

5 SSN \_\_\_\_\_ DL No. \_\_\_\_\_ Class \_\_\_\_\_ State \_\_\_\_\_ DL Expires \_\_\_\_\_

6 Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_ Scars, tattoos or other distinguishing marks \_\_\_\_\_

**ARE THERE ANY SOCIAL MEDIA SITES THAT YOU BELONG TO THAT WILL SHOW ANYTHING QUESTIONABLE SUCH AS ILLEGAL DRUG ACTIVITY, GANG INVOLVEMENT, ILLEGAL WEAPONS, CRIMINAL ACTIVITY OR INDECENT MATERIAL**

Please add Social media site media data here (usernames and platforms): \_\_\_\_\_

USE ADDITIONAL PAGES AT BACK, IF NECESSARY, TO COMPLETELY ANSWER ALL QUESTIONS.

## RESIDENCES

- 1 Beginning with your present address, list all addresses where you have lived ending with your address where you were a freshman in high school.

From	To	Address/City/State/Zip	County
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- 2 Have you falsified or omitted any of the above addresses in which you resided? Yes ☐ No ☐

## EDUCATIONAL HISTORY

1	High School(s) attended	City/State	From	To	Diploma or GED
_____	_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>

2	College/University Attended	From	To	Hours/Credits	Degree (if any)
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

- 3 How was your post-high school education financed? \_\_\_\_\_

- 4 Did you ever receive any type of academic or any other disciplinary action while in college? Yes ☐ No ☐  
If yes, then give a brief summary of each incident: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5** Other post-high school educational institutions attended (vocational, trade, business, etc.)

Name	City/State	Dates	Course/Certificate/Degree

**6** Have you falsified or omitted any information regarding of your above educational history? Yes ☐ No ☐

**WORK HISTORY**

Beginning with your present or most recent job, list **ALL** employment, including part-time, temporary or seasonal work. Attach extra pages if necessary.

**1** From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Supervisor \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**List 3 Co-Workers:**

Name	Phone	E-mail

Reason for leaving \_\_\_\_\_

Have you ever received any type of disciplinary action? (Reprimands, suspensions, etc.) Yes ☐ No ☐

Explain: \_\_\_\_\_

\_\_\_\_\_

**2** From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Supervisor \_\_\_\_\_

Phone \_\_\_\_\_  
Email \_\_\_\_\_

**List 3 Co-Workers:**

**Name**

**Phone**

**E-mail**

Reason for leaving \_\_\_\_\_

Have you ever received any type of disciplinary action? (Reprimands, suspensions, etc.) Yes ☐ No ☐

Explain: \_\_\_\_\_

**3** From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Supervisor \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**List 3 Co-Workers:**

**Name**

**Phone**

**E-mail**

Reason for leaving \_\_\_\_\_

Have you ever received any type of disciplinary action? (Reprimands, suspensions, etc.) Yes ☐ No ☐

Explain: \_\_\_\_\_

**4** From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Job Title \_\_\_\_\_

Duties \_\_\_\_\_  
Supervisor \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

**List 3 Co-Workers:**

**Name**

**Phone**

**E-mail**

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Reason for leaving \_\_\_\_\_

Have you ever received any type of disciplinary action? (Reprimands, suspensions, etc.) Yes ☐ No ☐

Explain: \_\_\_\_\_

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**5** From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Supervisor \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**List 3 Co-Workers:**

**Name**

**Phone**

**E-mail**

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Reason for leaving \_\_\_\_\_

Have you ever received any type of disciplinary action? (Reprimands, suspensions, etc.) Yes ☐ No ☐

Explain: \_\_\_\_\_

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**6** From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Supervisor \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**List 3 Co-Workers:**

Name	Phone	E-mail
_____	_____	_____
_____	_____	_____

Reason for leaving \_\_\_\_\_

Have you ever received any type of disciplinary action? (Reprimands, suspensions, etc.) Yes ☐ No ☐

Explain: \_\_\_\_\_

**7** From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Supervisor \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**List 3 Co-Workers:**

Name	Phone	E-mail
_____	_____	_____
_____	_____	_____

Reason for leaving \_\_\_\_\_

Have you ever received any type of disciplinary action? (Reprimands, suspensions, etc.) Yes ☐ No ☐

Explain: \_\_\_\_\_



**8** From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Supervisor \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**List 3 Co-Workers:**

**Name**

**Phone**

**E-mail**

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Reason for leaving \_\_\_\_\_

Have you ever received any type of disciplinary action? (Reprimands, suspensions, etc.) Yes ☐ No ☐

Explain: \_\_\_\_\_

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**9** From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Supervisor \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**List 3 Co-Workers:**

**Name**

**Phone**

**E-mail**

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Reason for leaving \_\_\_\_\_

Have you ever received any type of disciplinary action? (Reprimands, suspensions, etc.) Yes ☐ No ☐

Explain: \_\_\_\_\_

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**10** From \_\_\_\_\_ To \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

Job Title \_\_\_\_\_

Duties \_\_\_\_\_

Supervisor \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**List 3 Co-Workers:**

**Name**

**Phone**

**E-mail**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for leaving \_\_\_\_\_

Have you ever received any type of disciplinary action? (Reprimands, suspensions, etc.) Yes ☐ No ☐

Explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**11** Have you ever been fired or asked to resign? Yes ☐ No ☐ How many times? \_\_\_\_\_

Employer (s) \_\_\_\_\_ When? \_\_\_\_\_

Why? \_\_\_\_\_

**12** Have you ever quit a job without giving sufficient (2-3 weeks) notice? Yes ☐ No ☐

Employer (s) \_\_\_\_\_ How many times? \_\_\_\_\_

Why? \_\_\_\_\_ When? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**13** Do you have any reason to believe that a former employer (s) may give you a negative job reference? Yes ☐ No ☐

Name of employer (s) \_\_\_\_\_

Why? \_\_\_\_\_

\_\_\_\_\_

14 Have you ever interned with a Police Department? Yes ☐ No ☐ If so, what was your job title?

What section? \_\_\_\_\_ When did you intern? From: \_\_\_\_\_ To: \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_

15 Have you ever participated in any internship with any other law enforcement agency? List agency, supervisors phone number and how long you were an intern.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16 Have you falsified or omitted any information regarding your above work history? Yes ☐ No ☐

## REFERENCES

List five (5) persons (other than family members already listed) who can provide current information about you.

1 Name \_\_\_\_\_ Years known \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home phone ( ) \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_  
Work address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email address \_\_\_\_\_

2 Name \_\_\_\_\_ Years known \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home phone ( ) \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_  
Work address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email address \_\_\_\_\_

3 Name \_\_\_\_\_ Years known \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home phone ( ) \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_  
Work address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email address \_\_\_\_\_

4 Name \_\_\_\_\_ Years known \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home phone ( ) \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_  
Work address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email address \_\_\_\_\_

**5** Name \_\_\_\_\_ Years known \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home phone (    ) \_\_\_\_\_ Work Phone (    ) \_\_\_\_\_ Cell (    ) \_\_\_\_\_  
Work address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email address \_\_\_\_\_

**6** Name \_\_\_\_\_ Years known \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home phone (    ) \_\_\_\_\_ Work Phone (    ) \_\_\_\_\_ Cell (    ) \_\_\_\_\_  
Work address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email address \_\_\_\_\_

**7** Name \_\_\_\_\_ Years known \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home phone (    ) \_\_\_\_\_ Work Phone (    ) \_\_\_\_\_ Cell (    ) \_\_\_\_\_  
Work address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email address \_\_\_\_\_

**8** Name \_\_\_\_\_ Years known \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home phone (    ) \_\_\_\_\_ Work Phone (    ) \_\_\_\_\_ Cell (    ) \_\_\_\_\_  
Work address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email address \_\_\_\_\_

**9** Name \_\_\_\_\_ Years known \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home phone (    ) \_\_\_\_\_ Work Phone (    ) \_\_\_\_\_ Cell (    ) \_\_\_\_\_  
Work address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email address \_\_\_\_\_

**10** Name \_\_\_\_\_ Years known \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home phone (    ) \_\_\_\_\_ Work Phone (    ) \_\_\_\_\_ Cell (    ) \_\_\_\_\_  
Work address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email address \_\_\_\_\_

**MILITARY RECORD (Include Reserve or National Guard service)**

1 Have you ever applied and been rejected for military service? Yes ☐ No ☐  
When ? \_\_\_\_\_ What branch of service? \_\_\_\_\_

2 Have you ever been a member of the military including Reserves or National Guard? Yes ☐ No ☐  
If no, skip to the next section on **Law Enforcement Related Experience**.

3	Branch of Service	From	To	Highest Rank	DD214 Provided?
	_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
	_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
	_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>

4 What was your total service on active duty? (Give years, months, days) \_\_\_\_\_

5 Are you currently in the Reserves? Yes ☐ No ☐ If so, what is your status:  
Ready Reserves ☐ Individual Ready Reserves ☐ Inactive Reserves ☐ Active Duty Reserves ☐

6 Are you currently in the National Guard? Yes ☐ No ☐ Active duty ☐ Inactive duty ☐

7 List all types of disciplinary actions, including arrest, if any, (letter of reprimand, oral reprimand, court martial, captain's mast, company punishment, Article 15) while in the military.

Charge	Date	Age at Time	Disposition
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**OTHER MILITARY INFORMATION**

☐ Check this box if you have NEVER been a member of the armed forces in either an active or inactive capacity.

If you served in the military (active or inactive), please answer the following:

1. Have you ever received anything other than an honorable (or general under honorable conditions) discharge from military service? Yes ☐ No ☐  
If yes, please explain below.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Were you ever AWOL while in the military? Yes ☐ No ☐

If yes, please explain below.

- 3 Have you falsified or omitted any information regarding your above military history? Yes ☐ No ☐

**THE POLYGRAPH EXAMINER IS AUTHORIZED BY THE SOUTH TEXAS COLLEGE POLICE ACADEMY TO ASK IF YOU HAVE BEEN TRUTHFUL IN LISTING ALL AGENCIES WITH WHICH YOU HAVE APPLIED OR WORKED, ALL JOBS FROM WHICH YOU HAVE BEEN FIRED OR ASKED TO RESIGN, ANY MILITARY DISCIPLINE AND WHETHER OR NOT YOU HAVE BEEN TRUTHFUL IN THE APPLICATION PROCESS.**

#### **LAW ENFORCEMENT RELATED EXPERIENCE**

- 1 List all law enforcement agencies or correctional agencies to which you have ever applied for employment but were not employed. (Begin with the most recent.)

Agency	Month/Year	Status (tested, failed test, failed board, etc.)

- 2 Have you ever served/been employed in a law enforcement related position? Yes ☐ No ☐

**This would include positions as a sworn or commissioned law enforcement officer, peace officer, sheriff's deputy, state or federal agent, commissioned reserve officer or any other position charged and sworn to uphold the law; cadet, recruit or other position as an entry level student in a law enforcement agency's training academy; a custodial officer, jailer or other position dealing with prisoners in a prison or jail facility; police dispatcher, police communication operator or other position dealing with intaking and dispatching of emergency calls or the supervision of emergency call centers; crime laboratory, crime scene or forensic specialists or other position dealing with evidence collection or analysis; or prosecutor.**

If no, skip to the next section on **Friends, Associates and Marital History**.

- 3 Are you a licensed peace officer or have you ever been a licensed peace officer in Texas, any other state or the federal government? Yes ☐ No ☐ If no, skip to question 7 in this section.

- 4 List certifications and/or licenses, by any state as a peace officer.

Federal Agency or State	License or Certificate	Dates

- 5 Have you ever had your peace officer license suspended, revoked, probated or have you received any type of reprimand or disciplinary action by the state or licensing agency? Yes ☐ No ☐ Explain:

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- 6 Are you currently a reserve officer? Yes ☐ No ☐ Where? \_\_\_\_\_  
 How many hours per month do you work as a reserve officer? \_\_\_\_\_  
 List all other agencies where you have been a reserve officer.

Agency	Date	Outcome (Hired/Not Hired)
_____	_____	_____
_____	_____	_____
_____	_____	_____

- 7 Have you ever been notified in any form by any law enforcement or corrections agency that you were the subject of an in-house investigation, be it criminal, civil or administrative? Yes ☐ No ☐ Detail each occurrence and outcome:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- 8 Have you ever been notified in any form by a judicial, prosecutorial or grand jury entity that you are/were the subject of an investigation? Yes ☐ No ☐ Detail each occurrence and outcome:

\_\_\_\_\_

- 9 Have you ever had any disciplinary actions taken against you as a law enforcement related professional? Disciplinary action includes days off without pay, oral reprimands, written reprimands, vacation days surrendered in lieu of days off without pay. Disciplinary action also includes surrender of promotion and/or reduction in rank or pay scale. Yes ☐ No ☐ Detail each occurrence and outcome.

Date	Agency and Supervisor Name	Violation	Type of Discipline
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

- 10 Have you ever been terminated, asked to resign or voluntarily resigned from a law enforcement related position as a result of an internal investigation or allegations of misconduct? Yes ☐ No ☐ Detail each occurrence and outcome.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

11. While employed in a law enforcement related position, did you ever commit a felony or misdemeanor which would have been punishable by incarceration? Yes ☐ No ☐  
 If yes, please explain below.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

12. While employed in a law enforcement related position, have you ever abused a prisoner or violated a prisoner's civil rights? Yes ☐ No ☐

If yes, please explain below.

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13. While employed in a law enforcement related position, have you ever accepted a bribe or pay off?

Yes ☐ No ☐

If yes, please explain below.

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14. While employed in a law enforcement related position, have you ever filed a false report/official record?

Yes ☐ No ☐

If yes, please explain below.

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15. While employed in a law enforcement related position, have you ever warned a person that they were the subject of a criminal investigation? Yes ☐ No ☐

If yes, please explain below.

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16. While employed in a law enforcement related position, have you ever run and/or used computerized criminal history information for personal reasons? Yes ☐ No ☐

If yes, please explain below.

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☐ Check this box if you have NEVER been involved in any of the above listed acts while employed in a law enforcement related position.

**BEFORE CONTINUING, BE SURE THAT YOU HAVE NOT FAILED TO LIST ANY OF THE INFORMATION REQUESTED IN THE PRECEDING QUESTIONS WHICH YOU MIGHT RECALL.**

**THE POLYGRAPH EXAMINER IS AUTHORIZED TO ASK YOU QUESTIONS REGARDING THE TRUTHFULNESS OF YOUR STATEMENTS ABOUT PRIOR LAW ENFORCEMENT RELATED SERVICE.**



## MARITAL HISTORY, FAMILY, ASSOCIATES AND FRIENDS

- 1 List all children and dependents below.

Name	Relation	Address

- 2 Are you or have you ever been responsible for making child support payments? Yes ☐ No ☐

- 3 Has any agency, whether governmental or private, contacted you because of delinquent child support payments? Yes ☐ No ☐ Detail the who, when, where and why of any such notification.

What was the result? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you current on your payments? Yes ☐ No ☐ If not, how much do you owe? \_\_\_\_\_

### CURRENT STATUS

- 1 Single ☐ Married ☐ Divorced ☐ Widowed ☐ Dating ☐

- 2 Name of current spouse, fiancé, significant other: \_\_\_\_\_  
(First) (Middle) (Maiden) (Last)

- 3 Place and date of marriage \_\_\_\_\_

- 4 Partner's present or last address \_\_\_\_\_  
(Street and Number) (City) (State) (Zip)

- 5 \_\_\_\_\_  
(Home Phone) (Work Phone) (Fax) (E-mail)

- 6 Partner's occupation \_\_\_\_\_

- 7 Partner's last employer \_\_\_\_\_

- 8 Children with current partner:

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Name: \_\_\_\_\_ Age: \_\_\_\_\_

- 9 Has the applicant been divorced (separated) or had a marriage annulled? Yes ☐ No ☐ If yes, list information related to all former spouses below, including information on who initiated and the events that led to the end of the marriage.

Name \_\_\_\_\_ Place and date of marriage: \_\_\_\_\_

Address \_\_\_\_\_  
(Street and Number) (City) (State) (Phone #)

Last occupation: \_\_\_\_\_ Last employer: \_\_\_\_\_

Place and Date of Divorce, Separation or Annulment:

Details: \_\_\_\_\_

Name \_\_\_\_\_ Place and date of marriage: \_\_\_\_\_

Address \_\_\_\_\_  
(Street and Number) (City) (State) (Phone #)

Last occupation: \_\_\_\_\_ Last employer: \_\_\_\_\_

Place and Date of Divorce, Separation or Annulment:

Details: \_\_\_\_\_

Name \_\_\_\_\_ Place and date of marriage: \_\_\_\_\_

Address \_\_\_\_\_  
(Street and Number) (City) (State) (Phone #)

Last occupation: \_\_\_\_\_ Last employer: \_\_\_\_\_

Place and Date of Divorce, Separation or Annulment:

Details: \_\_\_\_\_

#### PARENTS

Name	Relation	Address
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_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

#### SIBLINGS

Name	Relation	Address
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_____	_____	_____
_____	_____	_____
_____	_____	_____

## ASSOCIATES

- 1 Have any of your close friends, associates or members of your immediate family (parents, brothers, sisters, spouse, children or other relatives that live with or near you) ever been arrested as adults that you are aware of either through personal knowledge or hearsay? Yes ☐ No ☐ If yes, complete the following:

Arrestee's Name	Relationship to Applicant	Arresting Agency	Name of Offense

- 2 List the name of current or past commissioned peace officer or civilian law enforcement employee you are acquainted with or related to. Detail the relationship. (Friend or know from ride along, etc.)

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- 3 List all agencies with whom you have participated in a ride along and the officer with whom you rode.

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## FINANCIAL HISTORY AND OBLIGATIONS

- 1 List any and all accounts or property that were repossessed or charged off:

Account/Property	Date	Explanation

- 2 Have you ever been notified either verbally or in writing that a site order (check) signed by you, be it on an individual or non-individual account, was returned by a banking institution marked or stamped "account closed"? Yes ☐ No ☐ If yes, explain circumstances (include date, bank, name and amount of check(s)).

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- 3 Have you ever written any checks which were returned for "insufficient funds" or been notified by a bank that your account was overdrawn? (Excluding overdraft protection.) Yes ☐ No ☐ If yes, explain circumstances (include date, bank, name and amount of check(s)).

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**TRAFFIC RECORD (Complete only if position requires valid driver license.)**

- 1 List any and all incidents where your driver license has been suspended, revoked or put on probation in any county or state.

Date	Location	Reason
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

**For the purpose of answering the below question: arrested is defined as being detained by a law enforcement agency or agent acting on a warrant of arrest or summons issued in your name indicating a failure to properly dispose of a traffic, parking or other misdemeanor citation within the prescribed number of days after receipt of the citation; and detained means transported to jail, transported to a magistrate, or transported before a court clerk where a fine had to be paid or bond posted to avoid your incarceration, whether or not the fine and/or bond was actually posted by you or someone else.**

- 2 For any reason whatsoever, have you ever in your lifetime failed to pay or otherwise legally dispose of any traffic, parking or other misdemeanor citation? Yes ☐ No ☐ If yes, please explain:

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Have you ever been arrested on a traffic warrant? Yes ☐ No ☐ If so, when and by what agency?

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- 3 Have you ever received a ticket for not showing proof that the vehicle you were driving was covered by insurance? Yes ☐ No ☐ If so, how many times? \_\_\_\_\_

Have you ever been convicted of driving without insurance? Yes ☐ No ☐ If so, how many times? \_\_\_\_\_

- 4 List all moving and non-moving tickets (i.e. speeding, ran red light, unsafe lane change, expired registration, no insurance, etc.) excluding parking tickets that you have received in the last seven years starting with the most recent ticket. "Disposition of Ticket" means how you chose to take care of the ticket (i.e. did you plead guilty and take defensive driving, pay a fine, have the ticket dismissed by a judge, receive deferred adjudication, etc.). If your ticket was for speeding, include the posted speed and the citation speed.

Date	Agency	Offense	Disposition	Posted Speed	Citation Speed
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>	<hr/>

- 5 List all of the accidents you have been involved in as a **driver** starting with the most recent accident. For this form, the determination of "At Fault/Not at Fault" is the listed opinion made by the investigative officer, not yours.

Date of Accident	Location (City/State)	Investigating Agency	At Fault/ Not at Fault
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## CRIMINAL ARRESTS & CONVICTIONS

- 1 Have you ever been **adjudicated** as a Delinquent Child? Yes ☐ No ☐ If yes, what were the circumstances of that adjudication?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- 2 Have you ever been **arrested** as an adult (age 17 and above)? Yes ☐ No ☐ If so, how many times? \_\_\_\_\_  
How many times for felonies? \_\_\_\_\_ How many times for misdemeanors? \_\_\_\_\_

- 3 Have you been arrested or convicted, as an adult, for the offense of driving while intoxicated or driving under the influence of drugs? Yes ☐ No ☐

If so, when? \_\_\_\_\_ Who was the arresting agency? \_\_\_\_\_  
What was the outcome of the arrest? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- 4 Have you ever been **arrested or convicted** for any other alcohol or drug-related offense? Yes ☐ No ☐  
If yes, list offenses, dates of arrests and disposition of cases.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- 5 Complete the following if you've been **arrested** as an adult, have **appeared as a defendant** in a criminal proceeding, and/or any and all **pending criminal charges** against you other than those listed above.

Date Arrested	Name of Offense	Court or Law Enforcement Agency (include City/State)	Disposition
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## ACTIVITY AGAINST PEOPLE AND PROPERTY – UNDETECTED (Please add data on page 24)

Have you ever engaged in any of the following?

1. Any act of unlawfully taking the life of another human being. Yes ☐ No ☐
2. Any act of unlawfully abducting another person.  
(unlawful restraining, tying up people, locking them up and holding them against their will) Yes ☐ No ☐
3. Any sexual act prior to age twenty (20) with another person who was less than fourteen (14) years of age at the time of the act or was more than three years younger than you. (Examples: sexual intercourse, oral sex, anal sex, touching the genitals or anus of another person or exposing your genitals or anus to another person.) Yes ☐ No ☐
4. Any act, after turning twenty (20), of knowingly making sexual contact or sexual penetration to include fondling of breast or genitals for sexual gratification, sexual intercourse, oral sexual, or anal sexual penetration with another person who was less than seventeen (17) years of age, or exposing your genitals or anus to another person who was less than seventeen (17) years of age. Yes ☐ No ☐
5. Any act of exposing your anus or genitals in public to arouse sexually or gratify yourself or another person. Yes ☐ No ☐
6. Any act, which caused bodily injury to another person.  
(Cuts, bruises, black eyes, internal injuries, broken bones) Yes ☐ No ☐
7. Yes ☐ No ☐
8. Any act of cruelty to any creature or animal which results in harm, injury, or death other than legally licensed sport hunting or fishing. Yes ☐ No ☐
9. Any act of sexual assault, either by force or threats of injury. Yes ☐ No ☐
10. Any act involving hurting, harming or attempting to hurt or harm another person using a firearm, knife, club or any other deadly weapon. Yes ☐ No ☐
11. Any act of unlawfully causing injury to any person fourteen (14) years of age or younger, sixty-five (65) years of age or older, or who is disabled. Yes ☐ No ☐
12. Any incestuous act of knowingly making sexual contact or sexual penetration to include fondling of breast or genitals for sexual gratification, sexual intercourse, oral sexual, anal sexual penetration, or exposing your genitals or anus to your natural child, stepchild or child by adoption; natural grandchild, step-grandchild or grandchild by adoption; sister or half-sister, brother or half-brother, niece or nephew. Yes ☐ No ☐
13. Any act involving taking or keeping a child under eighteen (18) years of age out of the state in which the child resides, in violation of a judgment or order of a court disposing of the child's custody. Yes ☐ No ☐
14. Any act of causing, planning or starting a fire or an explosion to damage or destroy vegetation, fences or structure on open land; a building, habitation or vehicle belonging to another person; or a building, habitation, vehicle or property belonging to you which was insured. Yes ☐ No ☐
15. Any act involving the intentional damage or destruction of any property belonging to another person. (Keyed car, slashing tires, painting walls, breaking windows, etc...) Yes ☐ No ☐

16. Any act involving the use of a firearm, knife, club, deadly weapon, physical force, threats or intimidation in order to steal or take property from another person. Yes ☐ No ☐
17. Any act involving breaking into a building, habitation or any portion of a habitation or building in order to take or steal cash, property or merchandise; or with the intent of committing any other criminal act. Yes ☐ No ☐
18. Any act involving breaking into or entering a vehicle of any kind, including cars, pickups, trucks, trailers, box cars, vans or motor homes in order to commit theft or any other felony. Yes ☐ No ☐
19. Any act which unlawfully deprives an individual of property, cash or merchandise through appropriation, theft, theft by check, theft by false pretext, theft from a person, shoplifting, swindling, embezzlement, extortion, changing price tags, receiving stolen property, unlawfully receiving a service without paying for it or stealing vehicle accessories, or any form of theft – including making a false claim to an insurance company. This does not include previously mentioned thefts from employers. Yes ☐ No ☐
20. Any act involving forgery of any writing, document, signature, money, any legal document, license, contract, credit card, check, security agreement, will, deed, or any deed of trust with the intention to defraud or harm any person or business. (Counterfeiting documents: birth certificates, social security cards, I.D cards, driver's license, license plate and inspection stickers for vehicles) Yes ☐ No ☐
21. Any act involving theft of a vehicle. Yes ☐ No ☐
22. Any act involving use of a vehicle without the owner's consent or joy-riding in a stolen vehicle. Yes ☐ No ☐
23. Any act involving bribing or attempting to bribe any governmental officer or employee. Yes ☐ No ☐
24. Any act involving telling any lie, falsehood or misrepresentation of any act while under oath or a sworn or notarized document. Yes ☐ No ☐
25. Any act related to filing a false report to any peace officer. Yes ☐ No ☐
26. Any act involving impersonating a peace officer, official or other governmental official. Yes ☐ No ☐
27. Any act involving evading, resisting or interfering with any peace officer in making any arrest or detention of any person, including yourself. Yes ☐ No ☐
28. Any act involving the unlawful possession of any explosive weapon, machine gun, short-barreled firearm, armor piercing ammunition, silencer, switchblade knife, knuckles, chemical dispensing device, or zipgun. (Purchasing weapons for someone else, concealing weapons, exporting ammunition and weapons) Yes ☐ No ☐
29. Any act involving the unlawful carrying of a handgun, illegal knife or club. Yes ☐ No ☐
30. Any act involving possession, downloading or accessing of obscene materials that contain images of a child (under 18 years of age). Yes ☐ No ☐
31. Any act involving downloading or accessing of obscene materials on an employer's computer. Yes ☐ No ☐
32. Any act involving illegal gambling, including promotion of a gambling house or possessing a gambling device, excluding dice or cards. Yes ☐ No ☐

33. Any act involving any participation in any criminal enterprise or organized activity which seeks to further murder, arson, robbery, burglary, theft, kidnapping, aggravated assault, forgery, gambling, prostitution, promotion or distribution of drugs, promotion or sale of obscene materials or any other criminal act.  
Any type of smuggling (humans, weapons, cigarettes, drugs, liquor etc...) Yes ☐ No ☐
34. Involvement and/or participation in any type of activity, as an adult, which resulted in arrest, police investigation, or questioning by a law enforcement agency. This includes any instance where charges were filed, warrants issued and/or bond was posted. Yes ☐ No ☐  
A suspect in an investigation where you were involved as an informant for any police agency.
35. Have you ever been a member of or associated with a street gang? Yes ☐ No ☐  
(prison gang, motorcycle gangs Bandidos, Border Brothers, Crips, MS-13, Texas Syndicate)
36. Have you ever solicited a prostitute, engaged in illegal prostitution, commercial sexual activity, escort service, massage parlor, either in the US or other country? Yes ☐ No ☐
37. Theft of intellectual property (computer music, movies, software, Pirating, counterfeiting and selling for profit) Yes ☐ No ☐
38. Have you used any type of computer system for the purpose destroying data, identity, and or commit fraud? Yes ☐ No ☐

[illegible]



## ILLEGAL DRUGS

In all cases, South Texas College Police Academy is concerned with the illegal sale of drugs to another person (with or without profit to you); delivery of illegal drugs to another person; transporting illegal drugs to be sold; trading illegal drugs for anything of value; manufacturing illegal drugs; the cultivation of illegal drug plants; or any other way being involved in a transaction involving illegal drugs.

In the space provided below, please list the type of illegal drug sold, manufactured, cultivated or delivered, the amount of the illegal drug, your age at the time, and the number of times you engaged in the illegal sale, manufacture, cultivation or delivery of drugs. Possessing drugs, purchasing for personal use, concealing, loading-offloading drugs, stashing drugs, weighing-cutting and bagging drugs to include pills, growing illegal drugs such as marijuana plants, etc., Being a lookout when a drug transaction is being conducted. Were you with anyone when they purchased illegal drugs. Have you associated with people involved with drugs that you witnessed when you were with them.

TYPE OF DRUG	AMOUNT	AGE	TYPE OF ACTIVITY	# OF TIMES

☐ Check this box if you have NEVER sold, manufactured, cultivated or delivered any illegal drug for any reason at all.

**BEFORE CONTINUING, BE SURE THAT YOU HAVE LISTED ALL SALES, MANUFACTURE, CULTIVATION OR DELIVERY OF ILLEGAL DRUGS IN WHICH YOU RECALL BEING INVOLVED.**

**THE POLYGRAPH EXAMINER IS AUTHORIZED BY THE SOUTH TEXAS COLLEGE POLICE ACADEMY TO ASK YOU QUESTIONS REGARDING YOUR TRUTHFULNESS ABOUT THE SALE OF ILLEGAL DRUGS. DRUG USE**

In recent years, drug usage has become extremely common in our society. The Department recognizes that it would be almost impossible to hire anyone who has not experimented with some drugs. However, it is important that the Department be aware of your **ILLEGAL** drug usage because, as a peace officer, you may in the future be called to testify as a witness in a criminal prosecution of an individual charged with illegal drug use, and the defense could ask about your own personal drug usage in an effort to attack or impeach your credibility.

1. Are you **currently using** drugs illegally? Yes ☐ No ☐
2. Have you used marijuana in your past? Yes ☐ No ☐
3. Have you used drugs other than marijuana in your past? Yes ☐ No ☐  
\*\*\*\*\* Including K2, Spice, Bath Salts, Liquid Vape, etc, \*\*\*\*\*

4. Have you illegally used drugs, including marijuana, while employed as a law enforcement or custodial officer?  
Yes ☐ No ☐

If you answered yes to any of these questions, please complete the following chart explaining the last time you used each of the drugs mentioned. Please check only drugs not legally prescribed to you that you have used.

	NAME	STREET NAMES	LAST TIME USED
<input type="checkbox"/>	<b>STIMULANTS</b>		
<input type="checkbox"/>	Benzedrine, Obetrol	Ice, Speed, Crank	
<input type="checkbox"/>	Desoxyn	Upper, Snot, Glue	
<input type="checkbox"/>	Cocaine	Coke, Rock, Crack, Snow	
<input type="checkbox"/>	Other Amphetamines	Dexies, Crystal, Black Beauties, Bennies	
<input type="checkbox"/>	Other Methamphetamines	Meth, Glass, Chalk, Crystal Meth	
<input type="checkbox"/>	<b>ANALGESICS</b>		
<input type="checkbox"/>	Codeine	Schoolboy	
<input type="checkbox"/>	Roxanol	"M," Morph	
<input type="checkbox"/>	Heroin	Horse, Smack, "H," Speedball (w/ cocaine)	
<input type="checkbox"/>	Dilaudid	Juice, Dillies	
<input type="checkbox"/>	Demerol	Demmies, Pain Killer	
<input type="checkbox"/>	Dolophine	Dollies, Meth	
<input type="checkbox"/>	Talwin	T' s	
<input type="checkbox"/>	Darvon	Pain Killer	
<input type="checkbox"/>	Hycodan, Vicodin	"	
<input type="checkbox"/>	Percodan	"	
<input type="checkbox"/>	Percoset	"	
<input type="checkbox"/>	Oxycontin	Oxy, Hillbilly Heroin	
<input type="checkbox"/>	<b>HALLUCINOGENS</b>		
<input type="checkbox"/>	Marijuana	MJ, Grass, Pot, Smoke	
<input type="checkbox"/>	LSD	LSD	
<input type="checkbox"/>	PCP	Angel Dust, Hog	
<input type="checkbox"/>	MDA	Love Boat, Hug Drug	
<input type="checkbox"/>	MDMA	Adam, Ecstasy, X, E	
<input type="checkbox"/>	<b>DEPRESSANTS/SEDATIVE/HYPNOTIC</b>		
<input type="checkbox"/>	GHB	G, Liquid Ecstasy	
<input type="checkbox"/>	<b>BARBITURATES</b>		
<input type="checkbox"/>	Luminal	Downers, Goofballs	
<input type="checkbox"/>	Seconal	Seconds, Reds	
<input type="checkbox"/>	Nembutal	Nembies	
<input type="checkbox"/>	Fiorinal, Fioricet	Phennies	
<input type="checkbox"/>	Talbutals	Tooies	
<input type="checkbox"/>	Butisol	Bute, Stoppers	
<input type="checkbox"/>	Amytal	Blue Devils, Yellow Jackets	
<input type="checkbox"/>	Alurate	Barbs, Rainbows	
<input type="checkbox"/>	<b>BENZODIAZEPINES</b>		
<input type="checkbox"/>	Rohypnol	"Roofies"	
<input type="checkbox"/>	Librium	Downers, Nerve Pills, Candy	
<input type="checkbox"/>	Clonopin	"	
<input type="checkbox"/>	Valium	"	
<input type="checkbox"/>	Dalmane	"	

<input type="checkbox"/>	Ativan	"	
<input type="checkbox"/>	Serax	"	
<input type="checkbox"/>	Xanax	"	
<input type="checkbox"/>	Tranxene	Tranks	
<input type="checkbox"/>	Quaalude	Ludes	
<input type="checkbox"/>	<b>STEROIDS</b>	Roids, Stack, Juice	

If there are other illegal drugs not listed on the chart that you have used within the time periods or while in the types of employment listed above, please list those below.

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**BEFORE CONTINUING, THINK CAREFULLY TO INSURE THAT YOU HAVE NOT FORGOTTEN TO LIST ANY ILLEGAL DRUG USAGE WHICH YOU CAN RECALL THAT YOU HAVE USED WITHIN THE TIME PERIODS OR WHILE IN THE TYPES OF EMPLOYMENT LISTED ABOVE.**

**THE POLYGRAPH EXAMINER IS AUTHORIZED TO ASK YOU QUESTIONS TO DETERMINE IF YOU WERE TRUTHFUL ABOUT YOUR ILLEGAL DRUG USAGE.**

ITEM #      EXPLANATION

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

☐ Check this box if you have NEVER been involved in any of the above-listed categories of criminal activity.

**Other than those listed above, what serious undetected crimes have you ever been involved in, as an adult? Be specific.**

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**BEFORE GOING TO THE NEXT SECTION, BE SURE THAT YOU HAVE CHECKED "YES" IN ALL AREAS THAT APPLY. MAKE SURE THAT YOU LISTED EVERY INVESTIGATION, ARREST, CONVICTION OR PROBATION FOR ANY CRIME.**

**BEFORE CONTINUING ON IN THE BOOKLET, BE SURE THAT YOU HAVE CORRECTLY ANSWERED ALL OF THE ABOVE LISTED QUESTIONS.**

**THE POLYGRAPH EXAMINER IS AUTHORIZED BY THE DEPARTMENT OF PUBLIC SAFETY TO ASK YOU QUESTIONS ABOUT ANY DETECTED OR UNDETECTED CRIME IN WHICH YOU HAVE BEEN INVOLVED.  
THEFT OF PROPERTY**

**In the space provided below, please make a list of all items valued over \$500 (cash, merchandise or other property) that you, as an adult, have illegally taken from an employer or other source. The \$500 value may be from a single event or it could be the aggregate amount of several thefts committed as part of a common scheme or episode of similar thefts. Include the value, the date (as close as possible) that the item(s) were taken, and the location from which the item(s) were taken.**

**ITEM TAKEN    VALUE    DATE    LOCATION**

ITEM TAKEN	VALUE	DATE	LOCATION

☐ **Check this box if you have NEVER taken any item(s) as described in the paragraph above.**

**BEFORE GOING TO THE NEXT SECTION, BE SURE THAT YOU HAVE NOT FAILED TO LIST ANY THEFT FROM AN EMPLOYER THAT YOU MIGHT HAVE COMMITTED.**

**THE POLYGRAPH EXAMINER IS AUTHORIZED TO ASK YOU QUESTIONS ABOUT YOUR FAILURE TO LIST ANY THEFT WHICH YOU RECALL HAVING COMMITTED, BUT WHICH YOU DID NOT LIST ABOVE.**

\*\*\*\*OTHER ILLEGAL ACTIVITY\*\*\*\*

1. Have you ever been a member of any group or organization which advocates violent dissent or the overthrow of the United States Government? Yes ☐ No ☐

If yes, please explain below.

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2. Have you ever been a member of a group or organization that advocates **Terrorism, violence, racism** or other illegal activities? **(to include to hurt or harm people, and to destroy property by terroristic threats)**

Yes ☐ No ☐

If yes, please explain below.

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3. Did you apply with the South Texas College Police Academy for any reason other than gainful employment? **(Are your intentions to commit any type of criminal acts?)**

Yes ☐ No ☐

If yes, please explain below.

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4. Have you done anything in your past that if known by the Department could possibly affect your application for employment? **(this includes any type of criminal activity as mentioned before, association with Terroristic groups)**

Yes ☐ No ☐

If yes, please explain below.

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\*\*\*\*\*BEFORE CONTINUING, BE SURE THAT YOU HAVE NOT FAILED TO LIST ANY OF THE INFORMATION REQUESTED IN THE PRECEDING QUESTIONS WHICH YOU MIGHT RECALL.

THE POLYGRAPH EXAMINER IS AUTHORIZED TO ASK YOU QUESTIONS REGARDING THE TRUTHFULNESS OF YOUR STATEMENTS.

**CIVIL SUITS/LITIGATIONS**

- 1 Have you ever had a monetary judgment entered against you by a court of law or a lien filed against you or your property? Yes ☐ No ☐ If yes, please explain:

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- 2 Have you ever been a party to a lawsuit as a Defendant? Yes ☐ No ☐ If yes, explain: \_\_\_\_\_

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## This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

## This image shows a full page of white paper with horizontal blue or grey ruling lines, typical of notebook paper. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.



PLEASE READ, SIGN AND DATE

You have now completed the polygraph pre-test booklet/personal history statement. You should stop for a moment and think about your answers to insure that you have accurately portrayed all of the information that was requested. Review your answers. If you now recall any information that was requested which you did not place in the booklet, go back and make the correction.

I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE, CORRECT, AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I HAVE NOT WITHHELD, FALISIFIED, OR MISREPRESENTED ANY INFORMATION REQUESTED IN THIS BOOKLET. I HEREBY GRANT AUTHORIZATION TO THE SOUTH TEXAS COLLEGE POLICE ACADEMY TO CONTACT ANY PERSON OR ORGANIZATION FOR INFORMATION AND/OR DOCUMENTS TO VERIFY THE VALIDITY OF ANY PREVIOUS STATEMENT.

Signed at

\_\_\_\_\_  
(City)

\_\_\_\_\_  
(State)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Applicant)

With a few exceptions, you have the right to request and be informed about information that the Sheriff's Office collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. (Reference: Government Code, Sections 552.021, 552.023 and 559.004.)

END OF BOOKLET