



Supplemental Personal History Statement (PHS)

Version A - Exempt

911 Dispatcher Candidates

Your Full Name

Legal First Name	Legal Middle Name	Legal Last Name
Other names, including nicknames, you have used or been known by		Last 4 digits of SSN

Instructions

Version A (Exempt) — Please carefully read these instructions before you begin.

- What this form is.** This Supplemental Personal History Statement (Supplemental PHS) asks questions that were not part of the initial, online PHS you completed at Public Safety Testing (PST). Some of those questions were blacked out on your online PHS, and they appear on this form. Question numbers match your initial online PHS so the two can be compared.
- Upload it only when instructed, and check your messages.** Upload this completed form when instructed or requested by the agency and be sure to meet any deadline. Do not send this form unprompted; send it only in response to a request or instruction from the agency. Watch for messages in your PST portal and check your spam or junk folder in case important messages from the agency end up there.
- Answer every question.** Mark Yes or No for every question. If a question does not apply to you, mark No. If you cannot remember or obtain information with reasonable diligence, say so in the notes box for that section.
- Explain every Yes.** Each Section has an "Additional Notes or Explanation" box, and Section 8 also has one after each subsection. For every question you answered Yes, write the question number and explain: what happened, when and where, and the outcome. Use these boxes for anything else you want the reader to know. They expand as you type, so give as much detail as you need.
- Be complete, accurate, and truthful.** Your answers will be used in your background investigation and are subject to verification. A Yes answer does not automatically disqualify you. However, being untruthful or leaving out requested information will most likely disqualify you from further testing and employment.
- Every answer is evaluated in context.** A negative factor in your background will be evaluated in light of the circumstances and facts surrounding it and its relevance to the job. You are encouraged to give full explanations.

7. **Keep a copy for your records.** Save your completed form and retain a copy. Other agencies you have applied to may also request this form, and this way you will have it ready for them.
8. **Use the version the agency sends.** Send your completed form only in the version the agency sent you (Version A or Version B). Do not send a different version. If an agency sends you a version you have not completed, complete that version. You can reuse your earlier answers for any questions that are the same.
9. **How to fill out and save this form.** This is a fillable PDF. Open it in the free Adobe Acrobat Reader (computer) or the Adobe Acrobat Reader app (phone or tablet). Download it here: [Adobe Acrobat Reader](#). Some web browsers and preview programs do not save typed entries reliably, so Acrobat Reader is recommended. Click a field to type; click a Yes or No circle to select it. To save, choose File > Save As and name the file LAST, FIRST - Supplemental PHS (for example, "SMITH, JANE - Supplemental PHS"), unless the agency gives you a different naming instruction. Save often and open the saved file to confirm your answers appear before you send it.
10. **How to submit.** Unless the agency gives you different, specific instructions, upload this form to the Documents section of your PST account profile. You may need to designate the agency it is intended for.
11. **Questions.** Questions about the deadline, which version to complete, or how to submit this form: contact the agency that requested it. You may contact PST about this Supplemental PHS or your initial, online PHS at 425.776.9615 or contact@publicsafetytesting.com.

2) Relatives and References

2.5 Spouse / Registered Domestic Partner

Full name of spouse / partner (write N/A if none):

Question	Yes	No
2.5 Is there, or has there been, a restraining order, stay-away order, or no-contact order in effect for this individual?	☐	☐

2.8 Former Spouse(s) / Registered Domestic Partner(s)

Answer for each former spouse or partner. Copy this block if you need more space.

Full name of former spouse / partner (write N/A if none):

Question	Yes	No
2.8 Is there, or has there been, a restraining order, stay-away order, or no-contact order in effect for this individual?	☐	☐

2.12 Additional Notes or Explanation of anything above in Section 2

If you answered Yes to any question in this section, explain here. Give the question number, what happened, when and where, and the outcome. Add anything else you want the reader to know. The box expands as you type.

5) Experience and Employment

Question	Yes	No
5.3.9 Have you stolen anything from an employer in the past seven years?	☐	☐
5.3.21 Have you ever used an employer's computer, cell phone, tablet, or other electronic device in violation of policy or for illegal activities?	☐	☐
5.3.22 In the past three years, have you missed days or been late to work due to drug or alcohol consumption?	☐	☐
5.3.23 Has your work performance ever been affected by your use of alcohol or drugs?	☐	☐

Question	Yes	No
5.3.24 In the past three years, have you been warned by an employer about your drinking or drug habits and their impact on your performance?	☐	☐

5.6 Additional Notes or Explanation of anything above in Section 5

If you answered Yes to any question in this section, explain here. Give the question number, what happened, when and where, and the outcome. Add anything else you want the reader to know. The box expands as you type.

6) Military Experience

Question	Yes	No
6.3.1 Have you ever been the subject of any judicial or non-judicial disciplinary action (such as court-martial, captain's mast, office hours, company punishment)?	☐	☐
6.3.3 Have you ever taken military property without permission for personal use, to sell, or to give away?	☐	☐

6.5 Additional Notes or Explanation of anything above in Section 6

If you answered Yes to any question in this section, explain here. Give the question number, what happened, when and where, and the outcome. Add anything else you want the reader to know. The box expands as you type.

7) Financial

Question	Yes	No
7.6 Have you ever failed to file income tax or cheated/lie on an income tax form?	☐	☐
7.11 Have you ever spent money for illegal purposes (e.g., illegal drugs, prostitution, purchase of fraudulent documents, etc.)?	☐	☐
7.12 Have you ever failed to make or been late on a court-ordered payment (e.g., child support, alimony, restitution, etc.)?	☐	☐
7.13 Have you written three or more bad checks in a one-year period?	☐	☐

7.14 Additional Notes or Explanation of anything above in Section 7

If you answered Yes to any question in this section, explain here. Give the question number, what happened, when and where, and the outcome. Add anything else you want the reader to know. The box expands as you type.

8) Legal

8.1 Disclosure of Arrests and Convictions

Please disclose any of the following which occurred on or after your 15th birthday, even if the records were sealed, expunged, dismissed, or pardoned: ALL detentions or arrests, whether they resulted in a conviction or not; ALL convictions; ALL diversion programs that were or were not successfully completed.

Question	Yes	No
8.1 Either as an adult or a juvenile, have you EVER been detained for investigation, held on suspicion, questioned, fingerprinted, arrested, indicted, criminally charged, or convicted of any misdemeanor or felony offense in this state or in any other legal jurisdiction (including offenses punishable under the Uniform Code of Military Justice)?	☐	☐

Notes or Explanation for Question 8.1

For each Yes above, give the question number, what happened, when and where, and the outcome. The box expands as you type.

8.2 Continued Questions

Question	Yes	No
8.2.2 Have you ever been placed on court probation as an adult?	☐	☐
8.2.3 Were you ever to appear before a juvenile court for an act which would have been a crime if committed as an adult?	☐	☐
8.2.5 Have the police ever been called to your home for any reason?	☐	☐
8.2.6 Have you or your spouse/partner ever been referred to child protective services?	☐	☐
8.2.7 Have you ever been the subject of an emergency protective order/restraining order/stay-away order?	☐	☐
8.2.9 Have you ever fraudulently received welfare, unemployment compensation, workers' compensation, or other state or federal assistance?	☐	☐
8.2.10 Have you ever worked while collecting unemployment benefits without reporting it?	☐	☐
8.2.11 Have you ever filed a false insurance or workers' compensation claim?	☐	☐
8.2.12 Other than those incidents listed and explained above, will your name appear in any police record system or police report as a VICTIM, WITNESS, or SUSPECT? (Do not include when acting in the capacity of paid employment, such as an EMT or store loss prevention officer.)	☐	☐
8.2.13 Are you currently, or have you ever within the past seven years, received unemployment benefits while also receiving other sources of income?	☐	☐
8.2.14 Have you ever been refused a security clearance or bond?	☐	☐

Notes or Explanation for Section 8.2

For each Yes above, give the question number, what happened, when and where, and the outcome. The box expands as you type.

8.3 Undetected Acts – Part 1

Within the past seven (7) years OR at any time after you were first employed in a public safety related field, such as law enforcement, the fire service, 911 communications, or corrections, have you ever committed any of the following misdemeanors even if you were not caught? You may not withhold any information regarding your involvement in any of the following acts, even if federal or state law relieved you from reporting the detention, arrest, or conviction that arose from it.

Question	Yes	No
8.3.1 Annoying / obscene phone calls or text messages; cyber bullying	☐	☐
8.3.2 Battery (use of force or violence upon another)	☐	☐
8.3.3 Brandishing a weapon (any type of weapon)	☐	☐
8.3.4 Carrying a concealed weapon without a permit	☐	☐
8.3.5 Contributing to the delinquency of a minor; providing alcohol to minors	☐	☐
8.3.6 Defrauding an innkeeper (not paying for food or room at a hotel/motel, campground, etc.)	☐	☐
8.3.7 Driving under the influence of alcohol and/or drugs	☐	☐
8.3.8 Drunk in public (being so intoxicated in a public place that you're not able to care for yourself)	☐	☐
8.3.9 Hit & run collision (no injuries)	☐	☐
8.3.10 Any hunting and/or fishing violations	☐	☐
8.3.11 Illegal gambling; including online gambling	☐	☐
8.3.12 Impersonating a peace officer (pretending to be a police officer)	☐	☐
8.3.13 Indecent exposure (including flashing or mooning); sex within public view and/or lewd or obscene conduct	☐	☐
8.3.14 Joyriding (using a car or other vehicle without owner's permission)	☐	☐
8.3.15 Petty theft (value up to \$750, including shoplifting/switching price tags)	☐	☐
8.3.16 Possession of alcohol as a minor	☐	☐
8.3.17 Possession of falsified or altered identification, including use of another person's ID (for any reason)	☐	☐
8.3.18 Possession of stolen property (including vehicles but not limited to vehicles, credit/debit cards, etc.)	☐	☐
8.3.19 Prostitution or soliciting a prostitute (including but not limited to patronizing illegal massage parlors)	☐	☐
8.3.20 Resisting arrest (including running from the police and/or delaying or obstructing an officer)	☐	☐
8.3.21 Trespassing	☐	☐
8.3.22 Vandalism (including "tagging," malicious mischief and/or property damage)	☐	☐
8.3.23 Intentionally writing a bad check	☐	☐

Question	Yes	No
8.3.24 Filing a false police report	☐	☐
8.3.25 Any other act amounting to a misdemeanor within the past seven years	☐	☐
8.3.26 Cruelty to animals	☐	☐
8.3.27 Street racing, Reckless driving	☐	☐

Notes or Explanation for Section 8.3

For each Yes above, give the question number, what happened, when and where, and the outcome. The box expands as you type.

8.4 Undetected Acts – Part 2

At any time in your life, have you ever committed any of the following, even if you were not caught? You may not withhold any information regarding your involvement in any of the following acts, even if federal or state law relieved you from reporting the detention, arrest, or conviction that arose from it.

Question	Yes	No
8.4.1 Arson (intentionally destroying property by setting a fire)	☐	☐
8.4.2 Assault with a deadly weapon	☐	☐
8.4.3 Theft of a vehicle and/or vehicle parts	☐	☐
8.4.4 Burglary (entering a structure or vehicle to commit theft or other crime)	☐	☐
8.4.5 Child molestation (performing unlawful acts with a child)	☐	☐
8.4.6 Accessing and/or possessing child pornography	☐	☐
8.4.7 Elder abuse/neglect	☐	☐
8.4.8 Embezzlement (theft of money or other valuables entrusted to you)	☐	☐
8.4.9 Felony drunk driving (involving injuries)	☐	☐
8.4.10 Forcible rape or other act of unlawful intercourse	☐	☐
8.4.11 Forgery (falsifying any type of document, check certificate, license, currency, etc.)	☐	☐
8.4.12 Hit & run (with injuries)	☐	☐
8.4.13 Hate crime	☐	☐
8.4.14 Insurance fraud	☐	☐

Question	Yes	No
8.4.15 Felony theft (value of over \$750 or any firearm)	☐	☐
8.4.16 Murder, homicide, or attempted murder	☐	☐
8.4.17 Perjury (lying under oath)	☐	☐
8.4.18 Possession of an explosive/destructive device	☐	☐
8.4.19 Robbery (theft from another person using a weapon, force, or fear)	☐	☐
8.4.20 Stalking	☐	☐
8.4.21 Blackmail or extortion	☐	☐
8.4.22 Any other act amounting to a felony	☐	☐
8.4.23 Copyright infringement (including illegally downloading or copying software, audio files, movies, digital files, etc.)	☐	☐
8.4.24 Illegal sex acts	☐	☐
8.4.25 Fraudulent use of a credit, ATM, debit, and/or check card	☐	☐

Notes or Explanation for Section 8.4

For each Yes above, give the question number, what happened, when and where, and the outcome. The box expands as you type.

8.5 Drug Use – Within the Past 6 Months

This covers the use of any drug, including the unauthorized use of prescription drugs or over-the-counter drugs. If you have used any of the following drugs within the past six months, mark Yes and give details, including circumstances and month & year of last use.

Question	Yes	No
8.5.1 Amphetamines / Methamphetamines (Uppers, Speed, Crank, etc.)	☐	☐
8.5.2 Barbiturates (Downers)	☐	☐
8.5.3 Cocaine / Crack Cocaine	☐	☐
8.5.4 Designer Drugs (Ecstasy, Synthetic Heroin, etc.)	☐	☐
8.5.5 GHB (Date Rape Drug)	☐	☐
8.5.6 Prescription drug(s) not prescribed to you	☐	☐
8.5.7 Glue	☐	☐

Question	Yes	No
8.5.8 Hallucinogens (Peyote, LSD, Mushrooms)	☐	☐
8.5.9 Hashish / Hashish Oil	☐	☐
8.5.10 Heroin / Opium	☐	☐
8.5.11 Cannabis	☐	☐
8.5.12 Prescription drugs used for recreation purposes	☐	☐
8.5.13 Mescaline	☐	☐
8.5.14 Morphine	☐	☐
8.5.15 PCP / Angel Dust	☐	☐
8.5.16 Quaaludes	☐	☐
8.5.17 Steroids	☐	☐
8.5.18 Tetrahydrocannabinol (THC)	☐	☐

Notes or Explanation for Section 8.5

For each Yes above, give the question number, what happened, when and where, and the outcome. The box expands as you type.

8.6 Drug Use – Prior to the Past 6 Months

Question	Yes	No
8.6.1 I have used, or experimented with, any drug recreationally prior to the last 6 months.	☐	☐
8.6.2 I have tried or used one or more drugs, but only under limited circumstances prior to the last 6 months (for example, experimentation, at parties, concerts, special events, etc.).	☐	☐

Notes or Explanation for Section 8.6

For each Yes above, give the question number, what happened, when and where, and the outcome. The box expands as you type.

8.7 Additional Drug Related Questions

Have you ever engaged in any of the activities listed below for drugs, prescription drugs, narcotics, or illegal substances, including cannabis?

Question	Yes	No
8.7.1 Sold	☐	☐
8.7.2 Manufactured	☐	☐
8.7.3 Present when illegal drugs were being used	☐	☐
8.7.4 Purchased	☐	☐
8.7.5 Furnished / Shared	☐	☐
8.7.6 Loaned money to someone else to purchase illegal drugs	☐	☐
8.7.7 Cultivated	☐	☐
8.7.8 Carried or held for another	☐	☐
8.7.9 Traded / Bartered	☐	☐

Notes or Explanation for Section 8.7

For each Yes above, give the question number, what happened, when and where, and the outcome. The box expands as you type.

8.8 Additional Notes or Explanation of anything above in Section 8

If you answered Yes to any question in this section, explain here. Give the question number, what happened, when and where, and the outcome. Add anything else you want the reader to know. The box expands as you type.

9) Motor Vehicle Operation

9.5 Traffic Citations (Excluding Parking Citations)

List all traffic citations, excluding parking citations, you have received within the past ten years. List the citation or infraction AS ORIGINALLY ISSUED. If the citation/infraction was reduced to a lesser violation for whatever reason, please explain.

Nature of violation	Location (street, city, state)	Date of violation	Action taken (Not Guilty / Fined / Traffic School / Dismissed)

Question	Yes	No
9.5a Have you ever been cited for or convicted of a criminal traffic offense, such as DUI, reckless driving, hit-and-run, or driving with a suspended license? If yes, please describe, including date(s) and disposition.	☐	☐

9.6 Additional Traffic Citation Questions

Has a traffic citation ever resulted in a warrant or caused your driver's license to be withheld due to the following?

Question	Yes	No
9.6.1 Failed to appear	☐	☐

Question	Yes	No
9.6.2 Failed to complete traffic school	☐	☐
9.6.3 Failed to pay the fine	☐	☐

9.8 Additional Questions

Question	Yes	No
9.8.1 Have you ever driven a vehicle without auto insurance, as by law?	☐	☐

9.9 Additional Notes or Explanation of anything above in Section 9

If you answered Yes to any question in this section, explain here. Give the question number, what happened, when and where, and the outcome. Add anything else you want the reader to know. The box expands as you type.

10) Other Topics

Question	Yes	No
10.1 Have you ever been refused a permit to carry a concealed weapon?	☐	☐
10.2 Are you now, or have you ever been, a member or associate of a criminal enterprise, street gang, or any other group that advocates violence against individuals because of their race, religion, political affiliation, ethnic origin, nationality, gender, sexual preference, or disability?	☐	☐
10.3 Do you have, or have you ever had, a tattoo signifying membership in, or affiliation with, a criminal enterprise, street gang, or any other group that advocates violence against individuals because of their race, religion, political affiliation, ethnic origin, nationality, gender, sexual preference, or disability?	☐	☐
10.4 Since the age of 16, have you ever been involved in an anger-provoked physical fight, confrontation, or other violent act?	☐	☐
10.5 Have you ever hit or physically overpowered a spouse or romantic partner?	☐	☐
10.6 Have you ever been involved in a domestic violence act with a relative, spouse, significant other, romantic partner or domestic partner, including but not limited to, an act of violence, threats, infliction of emotional distress and/or property damage?	☐	☐

Question	Yes	No
10.8 Have you ever engaged, or been accused of engaging, in sexual abuse inside a prison, jail, juvenile facility, lockup, or any other institution where there are inmates being held?	☐	☐
10.9 Have you ever been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, implied threats of force or coercion, or if the victim did not or was unable to consent?	☐	☐

Additional Notes or Explanation of anything above in Section 10

If you answered Yes to any question in this section, explain here. Give the question number, what happened, when and where, and the outcome. Add anything else you want the reader to know. The box expands as you type.

11) Certification

I hereby swear or affirm that there are no willful misrepresentations or omissions in, or falsifications of, the statements and answers in this Supplemental Personal History Statement. I understand that this is a continuing investigation and agree to notify the hiring agency of any information that may reflect any changes or additions in this Supplemental Personal History Statement.

BY ENTERING YOUR FULL LEGAL NAME BELOW, YOU ACKNOWLEDGE AND AGREE TO THE ABOVE CERTIFICATION

Name:

Date: