Personal History Statement (PHS)

Step 1 - Initial (Pre-Offer)

Last name	First name	Middle initial	Date

INSTRUCTIONS

1. Complete every question that is NOT blacked out, fully and truthfully. Use the "N/A" box where a category does not apply (for example, a deceased parent).
2. Some questions are blacked out on this version because Washington's Fair Chance Act (RCW 49.94) limits when an employer may ask about criminal records. Do not answer blacked-out questions or provide information about criminal arrests, criminal charges, criminal citations, convictions, or juvenile criminal cases anywhere on this form. Answer the questions specifically requesting civil lawsuits and civil traffic infractions, but do not include criminal-record information in those answers.
3. After a conditional job offer, the agency will send you a separate Step 2 (Post-Offer) Supplemental PHS that asks the blacked-out questions. Question numbers on this form stay the same so the two forms match.
4. Use the "Special Notes / Explanation" boxes to explain any "Yes" answer, and the Additional Notes boxes at the end of each section for anything else that applies to that section. Text in these boxes resizes to fit, and the boxes scroll, as you type, so give as much detail as you need.
5. Open this form in the free Adobe Acrobat Reader (get.adobe.com/reader). Complete it on screen, then use File > Save As to save a copy before closing. Name the file LAST, FIRST - Step 1 PHS (for example, "SMITH, JANE - Step 1 PHS"). If you print it instead, write clearly in black ink.
6. Complete the Certification on the last page. Unless the agency gives you different, specific instructions, upload the completed form to the Documents section of your PST profile. You may need to designate the intended agency. Do not send it to anyone else.
7. Questions about the deadline or how to return this form: contact the agency that gave it to you. You may contact PST about this form at 425.776.9615 or contact@publicsafetytesting.com.



Example of a blacked-out question

TRUTHFULNESS AND DISQUALIFICATION

The information you provide on this Personal History Statement (PHS) will be used in the investigation into your background to help determine your suitability for the public safety position you have applied for. Keep in mind that:

1. Complete every question that is not blacked out.
2. All statements are subject to verification.
3. All time periods in your background must be accounted for.
4. Deliberate untruthfulness, omissions or misrepresentation of information are grounds for disqualification from further testing or employment.

There are very few automatic bases for rejection. Any perceived negative factor in your background will be evaluated in light of the circumstances and facts surrounding it, and its relevance to the job. For example, having been fired from a job or having had financial problems is not, by itself, necessarily grounds for disqualification. However, deliberate misstatements or omissions can, and often will, result in your application being rejected, regardless of their nature or reason. The number one reason candidates are disqualified during a background investigation is deliberately withholding or misrepresenting job-relevant information.

BOTTOM LINE: You are responsible for providing complete, accurate, and truthful responses.

Blacked-out questions are not omissions. Leaving blacked-out questions unanswered and withholding criminal-record information as instructed are not omissions and will not be held against you. The employer may request supplemental questions separately after a conditional job offer.

DISCLOSURE OF MEDICAL AND GENETIC INFORMATION

In accordance with the Americans with Disabilities Act (ADA), the Genetic Information Nondiscrimination Act (GINA) and the Washington Law Against Discrimination (RCW 49.60), you are not expected or required to reveal any medical or disability-related information about yourself, or any genetic information (including family medical history), in response to questions on this form or to any other inquiry made before a conditional offer of employment.

1) Personal

1.1 YOUR FULL NAME

Legal First Name	Legal Middle Name	Legal Last Name

Other names, including nicknames, you have used or been known by

1.2 ADDRESS WHERE YOU RESIDE

Address	Address Line 2

City	State/Province/Region	Zip/Postal Code	Country

☐ N/A 1.3 MAILING ADDRESS (IF DIFFERENT FROM ABOVE)

Address	Address Line 2

City	State/Province/Region	Zip/Postal Code	Country

1.4 CONTACT NUMBERS

Number (i.e., 555-123-1234 x123)	Type (i.e., cell, home, text)

Number (i.e., 555-123-1234 x123)	Type (i.e., cell, home, text)

Number (i.e., 555-123-1234 x123)	Type (i.e., cell, home, text)

1.5 EMAIL ADDRESSES (LIST ALL USED IN THE LAST 5 YEARS)

Email address	Type (i.e., personal, business)

Email address	Type (i.e., personal, business)

Email address	Type (i.e., personal, business)

1.6 ADDITIONAL QUESTIONS

1.6.1 Are you a U.S. citizen?

○ Yes ○ No

1.6.2 Are you a resident alien who is eligible and has applied for U.S. citizenship?

○ Yes ○ No

1.6.3 Are you a Lawful Permanent Resident?

○ Yes ○ No

Birthplace (City/County/State/Country)	Birth date	Social Security Number (last 4 digits only)

Driver's License no. / State / Expiration	Height	Weight	Hair Color	Eye Color

1.7 PREFERRED METHOD OF CONTACT

☐ Phone ☐ Email ☐ Text Message

1.8 ADDITIONAL NOTES OR EXPLANATION OF ANYTHING ABOVE

Additional Notes or Explanation

2) Relatives and References

Immediate Family

Provide all applicable information in the spaces below. Mark "N/A" if a category is not applicable or if the individual is deceased.

☐ N/A 2.1 FATHER

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

Special Notes / Explanation

☐ N/A 2.2 STEP-FATHER

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

Special Notes / Explanation

☐ N/A 2.3 MOTHER

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

Special Notes / Explanation

☐ N/A 2.4 STEP-MOTHER

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

Special Notes / Explanation

☐ N/A 2.5 SPOUSE / REGISTERED DOMESTIC PARTNER

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

2.5

☐ N/A 2.6 FATHER-IN-LAW

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

Special Notes / Explanation

☐ N/A 2.7 MOTHER-IN-LAW

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

Special Notes / Explanation

☐ N/A **2.8 FORMER SPOUSE(S) / REGISTERED DOMESTIC PARTNER(S)**

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

Years of Marriage

2.8

Brothers and Sisters

List all living siblings, including brothers/sisters in-law, half-siblings, step-siblings, foster siblings, etc.

☐ N/A **2.9 BROTHERS AND SISTERS**

Name	Relation	Gender

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

Special Notes

Name	Relation	Gender

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

Special Notes

Name	Relation	Gender

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

Special Notes

Name	Relation	Gender

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

Special Notes

Name	Relation	Gender

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

Special Notes

Children

List all of your living children, including natural, adopted, step, and/or foster children.

☐ **N/A 2.10 CHILDREN**

Name	Child's Age	Gender

Relation: ☐ Son ☐ Daughter ☐ Other

Custodial Parent or Guardian (if other than you)	Cell phone	Email

Address	City	State/Province/Region	Zip/Postal Code	Country

Special Notes

Name	Child's Age	Gender

Relation: ☐ Son ☐ Daughter ☐ Other

Custodial Parent or Guardian (if other than you)	Cell phone	Email

Address	City	State/Province/Region	Zip/Postal Code	Country

Special Notes

Name	Child's Age	Gender

Relation: ☐ Son ☐ Daughter ☐ Other

Custodial Parent or Guardian (if other than you)	Cell phone	Email

Address	City	State/Province/Region	Zip/Postal Code	Country

Special Notes

Name	Child's Age	Gender

Relation: ☐ Son ☐ Daughter ☐ Other

Custodial Parent or Guardian (if other than you)	Cell phone	Email

Address	City	State/Province/Region	Zip/Postal Code	Country

Special Notes

References

List 7-10 people who know you well. Do not include relatives, employers/supervisors, housemates/roommates, or others listed elsewhere.

☐ **N/A 2.11 REFERENCES**

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

How do you know this person?	Occupation	How long have you known this person?

Special Notes

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

How do you know this person?	Occupation	How long have you known this person?

Special Notes

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

How do you know this person?	Occupation	How long have you known this person?

Special Notes

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

How do you know this person?	Occupation	How long have you known this person?

Special Notes

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

How do you know this person?	Occupation	How long have you known this person?

Special Notes

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

How do you know this person?	Occupation	How long have you known this person?

Special Notes

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

How do you know this person?	Occupation	How long have you known this person?

Special Notes

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

How do you know this person?	Occupation	How long have you known this person?

Special Notes

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

How do you know this person?	Occupation	How long have you known this person?

Special Notes

Name

Home Address	City	State/Province/Region

Zip/Postal Code	Country	Work Address

City	State/Province/Region	Zip/Postal Code	Country

Home phone	Work phone	Cell phone	Email

How do you know this person?	Occupation	How long have you known this person?

Special Notes

2.12 ADDITIONAL NOTES OR EXPLANATION OF ANYTHING ABOVE

Additional Notes or Explanation

3) Education

3.1 CHECK APPLICABLE:

☐ High School Diploma from an accredited U.S. institution ☐ GED

3.2 LIST ALL HIGH SCHOOLS ATTENDED

School Name

Date From	Date To	City	State

Did you graduate? ☐ Yes ☐ No

School Name

Date From	Date To	City	State

Did you graduate? ☐ Yes ☐ No

☐ N/A 3.3 LIST ALL COLLEGES OR UNIVERSITIES ATTENDED

School Name

Date From	Date To	City	State

Major/Type of degree earned	Total units earned

School Name

Date From	Date To	City	State

Major/Type of degree earned	Total units earned

School Name

Date From	Date To	City	State

Major/Type of degree earned	Total units earned

☐ N/A 3.4 LIST ANY TRADE, VOCATIONAL, OR BUSINESS SCHOOLS/INSTITUTES ATTENDED

School Name

Date From	Date To	City	State

Type of school or training

Did you complete the course? ☐ Yes ☐ No

School Name

Date From	Date To	City	State

Type of school or training

Did you complete the course? ☐ Yes ☐ No

☐ N/A 3.5 LIST ANY BASIC ACADEMIES ATTENDED

Academy name

Date From	Date To	City	State

Name of training officer / academy coordinator	Contact number

Did you graduate? ☐ Yes ☐ No

Academy name

Date From	Date To	City	State

Name of training officer / academy coordinator	Contact number

Did you graduate? ☐ Yes ☐ No

3.6 Have you ever been placed on academic discipline, suspended, or expelled from any high school, college/university, academy, business or trade school?

○ Yes ○ No

Special Notes / Explanation:	

3.7 ADDITIONAL NOTES OR EXPLANATION OF ANYTHING ABOVE

Additional Notes or Explanation

4) Residence

List all residences during the last ten years or since age 15. Provide complete addresses. Do not use P.O. Boxes. If the residence is a military base, identify name of base, nearest city, state and zip code.

4.1 CURRENT ADDRESS

Date From	Date To (Present)

Address	Address Line 2

City	State/Province/Region	Zip/Postal Code	Country

If renting, name of Property Manager/Landlord	Contact number	Email

Names of those with whom you live

4.2 PREVIOUS ADDRESSES

Date From	Date To

Address	Address Line 2

City	State/Province/Region	Zip/Postal Code	Country

If renting, name of Property Manager/Landlord	Contact number	Email

Names of those with whom you live	Reason for moving

. . . . . .

Date From	Date To

Address	Address Line 2

City	State/Province/Region	Zip/Postal Code	Country

If renting, name of Property Manager/Landlord	Contact number	Email

Names of those with whom you live	Reason for moving

. . . . . .

Date From	Date To

Address	Address Line 2

City	State/Province/Region	Zip/Postal Code	Country

If renting, name of Property Manager/Landlord	Contact number	Email

Names of those with whom you live	Reason for moving

. . . . . .

Date From	Date To

Address	Address Line 2

City	State/Province/Region	Zip/Postal Code	Country

If renting, name of Property Manager/Landlord	Contact number	Email

Names of those with whom you live	Reason for moving

Date From	Date To

Address	Address Line 2

City	State/Province/Region	Zip/Postal Code	Country

If renting, name of Property Manager/Landlord	Contact number	Email

Names of those with whom you live	Reason for moving

Date From	Date To

Address	Address Line 2

City	State/Province/Region	Zip/Postal Code	Country

If renting, name of Property Manager/Landlord	Contact number	Email

Names of those with whom you live	Reason for moving

Housemates

Provide contact info for all housemates listed above during the past 10 years, or since age 15.

4.3 HOUSEMATES

Name	Home Address	City	State/Province/Region

Zip/Postal Code	Country	Email	Phone

Nature of relationship (i.e., relative, landlord, friend, housemate only)

Name	Home Address	City	State/Province/Region

Zip/Postal Code	Country	Email	Phone

Nature of relationship (i.e., relative, landlord, friend, housemate only)

Name	Home Address	City	State/Province/Region

Zip/Postal Code	Country	Email	Phone

Nature of relationship (i.e., relative, landlord, friend, housemate only)

Name	Home Address	City	State/Province/Region

Zip/Postal Code	Country	Email	Phone

Nature of relationship (i.e., relative, landlord, friend, housemate only)

4.4 CONTINUED QUESTIONS

4.4.1 Have you ever been evicted or asked to leave a residence?

○ Yes ○ No

4.4.2 Have you ever left a residence owing rent, utilities, or household expenses?

○ Yes ○ No

4.5 ADDITIONAL NOTES OR EXPLANATION OF ANYTHING ABOVE

Additional Notes or Explanation

5) Experience and Employment

List ALL jobs you have had, including part-time, temporary, self-employment and volunteer. Begin with your most current. List ALL periods of unemployment in excess of 30 days. List your current/most recent supervisor and two co-workers.

5.1 CURRENT JOB

Date From	Date To

Name of employer or military unit

Address	Address Line 2	City	State	Zip	Country

Supervisor	Contact number	Email

Your Job Title

☐ Full time ☐ Part time ☐ Temporary ☐ Self-employed ☐ Volunteer

Duties / Assignments

Co-worker #1	Contact Number	Email

Co-worker #2	Contact Number	Email

Reason for wanting to leave

Would there be a problem if we contact your current employer?

○ Yes ○ No

5.2 PREVIOUS JOBS

Was there a period of unemployment between these jobs? ☐ Yes ☐ No

Date From	Date To	Name of employer or military unit

Address	City	State/Province/Region	Zip/Postal Code	Country

Supervisor	Cell number	Email	Your Job Title

☐ Full time ☐ Part time ☐ Temporary ☐ Self-employed ☐ Volunteer

Duties / Assignments

Co-worker #1	Co-worker #2	Reason for leaving

Would you be eligible for re-hire? ☐ Yes ☐ No

Was there a period of unemployment between these jobs? ☐ Yes ☐ No

Date From	Date To	Name of employer or military unit

Address	City	State/Province/Region	Zip/Postal Code	Country

Supervisor	Cell number	Email	Your Job Title

☐ Full time ☐ Part time ☐ Temporary ☐ Self-employed ☐ Volunteer

Duties / Assignments

Co-worker #1	Co-worker #2	Reason for leaving

Would you be eligible for re-hire? ☐ Yes ☐ No

Was there a period of unemployment between these jobs? ☐ Yes ☐ No

Date From	Date To	Name of employer or military unit

Address	City	State/Province/Region	Zip/Postal Code	Country

Supervisor	Cell number	Email	Your Job Title

☐ Full time ☐ Part time ☐ Temporary ☐ Self-employed ☐ Volunteer

Duties / Assignments

Co-worker #1	Co-worker #2	Reason for leaving

Would you be eligible for re-hire? ☐ Yes ☐ No

Was there a period of unemployment between these jobs? ☐ Yes ☐ No

Date From	Date To	Name of employer or military unit

Address	City	State/Province/Region	Zip/Postal Code	Country

Supervisor	Cell number	Email	Your Job Title

☐ Full time ☐ Part time ☐ Temporary ☐ Self-employed ☐ Volunteer

Duties / Assignments

Co-worker #1	Co-worker #2	Reason for leaving

Would you be eligible for re-hire? ☐ Yes ☐ No

Was there a period of unemployment between these jobs? ☐ Yes ☐ No

Date From	Date To	Name of employer or military unit

Address	City	State/Province/Region	Zip/Postal Code	Country

Supervisor	Cell number	Email	Your Job Title

☐ Full time ☐ Part time ☐ Temporary ☐ Self-employed ☐ Volunteer

Duties / Assignments

Co-worker #1	Co-worker #2	Reason for leaving

Would you be eligible for re-hire? ☐ Yes ☐ No

Was there a period of unemployment between these jobs? ☐ Yes ☐ No

Date From	Date To	Name of employer or military unit

Address	City	State/Province/Region	Zip/Postal Code	Country

Supervisor	Cell number	Email	Your Job Title

☐ Full time ☐ Part time ☐ Temporary ☐ Self-employed ☐ Volunteer

Duties / Assignments

Co-worker #1	Co-worker #2	Reason for leaving

Would you be eligible for re-hire? ☐ Yes ☐ No

5.3 Employment Questions

5.3.1 Have you been rejected for any positions you have applied for?

○ Yes ○ No

Special Notes / Explanation:	

5.3.2 Have you ever been disciplined at work? (written warnings, reprimands, suspensions, reductions in pay, reassignments or demotions)

○ Yes ○ No

Special Notes / Explanation:	

5.3.3 Is there any reason your present, or any previous, employers would give you less than a favorable recommendation?

○ Yes ○ No

Special Notes / Explanation:	

5.3.4 Have you ever been fired, released from probation, or asked to resign from any place of employment?

○ Yes ○ No

Special Notes / Explanation:	

5.3.5 Were you ever involved in a physical/verbal altercation with a supervisor, co-worker, or customer?

○ Yes ○ No

Special Notes / Explanation:	

5.3.6 Have you ever quit without giving proper notice?

○ Yes ○ No

Special Notes / Explanation:	

5.3.7 Have you ever resigned in lieu of termination?

○ Yes ○ No

Special Notes / Explanation:	

5.3.8 Has an employer ever accused you of a dishonest act?

○ Yes ○ No

Special Notes / Explanation:	

5.3.9 [redacted]

[redacted]

5.3.10 Have you ever been accused of discrimination (such as sexual harassment, racial bias, sexual orientation harassment, etc.) by a co-worker, superior, subordinate or customer?

○ Yes ○ No

Special Notes / Explanation:	

5.3.11 Were you ever the subject of a written complaint at work?

○ Yes ○ No

Special Notes / Explanation:	

5.3.12 Have you ever been counseled at work due to lateness or absences?

○ Yes ○ No

Special Notes / Explanation:	

5.3.13 Did you ever receive an unsatisfactory performance review?

○ Yes ○ No

Special Notes / Explanation:	

5.3.14 Have you ever been named as a defendant in a previously adjudicated work-related civil lawsuit (regardless of outcome)?

○ Yes ○ No

Special Notes / Explanation:	

5.3.15 Is there a work-related civil lawsuit pending in which you have been named as a defendant?

○ Yes ○ No

Special Notes / Explanation:	

5.3.16 Do you have reason to believe a work-related lawsuit may be filed in the future in which you may be named as a defendant?

○ Yes ○ No

Special Notes / Explanation:	

5.3.17 Have you ever sold, released, or given away legally confidential information?

○ Yes ○ No

Special Notes / Explanation:	

5.3.18 Have you ever called in sick when you were neither sick nor caring for a sick family member?

○ Yes ○ No

Special Notes / Explanation:	

5.3.19 Have you ever viewed pornographic material at your workplace?

○ Yes ○ No

Special Notes / Explanation:	

5.3.20 Have you ever engaged in sexual activity at work in violation of your employer's policy?

○ Yes ○ No

Special Notes / Explanation:	

5.3.21 Have you ever used an employer's computer, cell phone, tablet, or other electronic device in violation of policy?

○ Yes ○ No

Special Notes / Explanation:	

5.3.22 In the past three years, have you missed days or been late to work due to alcohol consumption?

○ Yes ○ No

Special Notes / Explanation:	

5.3.23 Has your work performance ever been affected by your use of alcohol?

○ Yes ○ No

Special Notes / Explanation:	

5.3.24 In the past three years, have you been warned by an employer about your drinking habits and their impact on your performance?

○ Yes ○ No

Special Notes / Explanation:	

5.4 Have you ever applied to any other law enforcement, corrections department, fire service, 911 dispatch center or any other type of public safety agency (city, county, state, or federal)?

○ Yes ○ No

Special Notes / Explanation:	

5.6 ADDITIONAL NOTES OR EXPLANATION OF ANYTHING ABOVE

Additional Notes or Explanation

6) Military Experience

6.1 Are you required to register for the Selective Service?

○ Yes ○ No

Special Notes / Explanation:	

☐ N/A **6.2 MILITARY EXPERIENCE**

Branch of Service	From date	To date

Type of discharge: ☐ Entry Level ☐ Honorable ☐ General ☐ Other Than Honorable ☐ Bad Conduct ☐ Dishonorable

Re-entry Code (1-4) if applicable - refer to your DD-214

6.3 Military Service Questions

6.3.1 Have you ever been the subject of any military NON-CRIMINAL disciplinary action (whether judicial or non-judicial, such as office hours, captain's mast, or company punishment)? Please do not provide any information about military criminal history here.

○ Yes ○ No

Special Notes / Explanation:	

6.3.2 Were you ever denied a security clearance, or had a clearance revoked, suspended or downgraded?

○ Yes ○ No

Special Notes / Explanation:	

6.3.3

6.4 MILITARY RESERVE / NATIONAL GUARD

Are you currently participating in one of the following? ☐ Military Reserve ☐ National Guard

6.5 ADDITIONAL NOTES OR EXPLANATION OF ANYTHING ABOVE

Additional Notes or Explanation

7) Financial

If you answer any of the following questions with "Yes", please include in the explanation the amounts to the nearest dollar.

7.1 Have you ever filed for or declared bankruptcy (Chapter 7, 11 or 13)?

○ Yes ○ No

Special Notes / Explanation:	

7.2 Have any of your bills ever been turned over to a collection agency?

○ Yes ○ No

Special Notes / Explanation:	

7.3 Have you ever had purchased goods repossessed?

○ Yes ○ No

Special Notes / Explanation:	

7.4 Have your wages ever been garnished?

○ Yes ○ No

Special Notes / Explanation:	

7.5 Have you ever been delinquent on income or other tax payments?

○ Yes ○ No

Special Notes / Explanation:	

7.6

7.7 Have you ever had an employment bond refused?

○ Yes ○ No

Special Notes / Explanation:	

7.8 Have you ever avoided paying any lawful debt by moving away?

○ Yes ○ No

Special Notes / Explanation:	

7.9 Have you ever defaulted on (failed to pay) a loan?

○ Yes ○ No

Special Notes / Explanation:	

7.10 Have you ever borrowed money to pay for a gambling debt?

○ Yes ○ No

Special Notes / Explanation:	

7.11

7.12 Have you ever failed to make or been late on a court-ordered payment (e.g., child support, alimony, etc.)?

○ Yes ○ No

Special Notes / Explanation:	

7.13 Have you written three or more bad checks in a one-year period?

○ Yes ○ No

Special Notes / Explanation:	

7.14 ADDITIONAL NOTES OR EXPLANATION OF ANYTHING ABOVE

Additional Notes or Explanation

8) Legal

[redacted]

8.1

8.2 Continued Questions

8.2.1 Have you been reported to a law enforcement agency as a missing person or a runaway?

○ Yes ○ No

Special Notes / Explanation:	

8.2.2

8.2.3

8.2.4 Have you ever been a party in a non-work related civil lawsuit (e.g., small claims actions, dissolutions, child custody, probate, etc.)?

○ Yes ○ No

Special Notes / Explanation:	

8.2.5

8.2.6

8.2.7

8.2.8 Have you settled any civil suit in which you, your insurance company, or anyone else on your behalf was to make payment to the other party?

○ Yes ○ No

Special Notes / Explanation:	

8.2.9

8.2.10

8.2.11

[redacted]

8.2.12

8.2.13

8.2.14

8.3

8.4

8.5

8.6

8.7

8.8

9) Motor Vehicle Operation

☐ N/A **9.1 CURRENT INFORMATION**

Current Driver's License #	State of Issue	Expiration Date

Name under which license was granted

☐ N/A **9.2 OTHER STATES WHERE YOU HAVE BEEN LICENSED TO OPERATE A MOTOR VEHICLE**

State of Issue	Type of license	License Number, if known

State of Issue	Type of license	License Number, if known

State of Issue	Type of license	License Number, if known

9.3 CONTINUED QUESTIONS

9.3.1 Have you ever been refused a driver's license by any state?

○ Yes ○ No

9.3.2 Has your driver's license ever been suspended or revoked? Do not include suspensions resulting from a criminal case; those are addressed after a conditional job offer.

○ Yes ○ No

☐ N/A **9.4 LIST YOUR CURRENT LIABILITY INSURANCE ON YOUR VEHICLE(S)**

Vehicle Make	Year	Vehicle license

Insurance company	Policy #	Expires

Insurance company address	City	State/Province/Region	Zip/Postal Code	Country

Insurance company phone number	Insurance company email

Vehicle Make	Year	Vehicle license

Insurance company	Policy #	Expires

Insurance company address	City	State/Province/Region	Zip/Postal Code	Country

Insurance company phone number	Insurance company email

Vehicle Make	Year	Vehicle license

Insurance company	Policy #	Expires

Insurance company address	City	State/Province/Region	Zip/Postal Code	Country

Insurance company phone number	Insurance company email

☐ N/A 9.5 TRAFFIC CITATIONS (EXCLUDING PARKING CITATIONS)

List all CIVIL traffic infractions you have received within the past ten years (for example: speeding, failure to signal, expired registration). Do not list criminal charges.

Nature of Violation	Location (street, city, state)

Date of violation

Action taken: ☐ Not Guilty ☐ Fined ☐ Traffic School ☐ Dismissed

Nature of Violation	Location (street, city, state)

Date of violation

Action taken: ☐ Not Guilty ☐ Fined ☐ Traffic School ☐ Dismissed

Nature of Violation	Location (street, city, state)

Date of violation

Action taken: ☐ Not Guilty ☐ Fined ☐ Traffic School ☐ Dismissed

Nature of Violation	Location (street, city, state)

Date of violation

Action taken: ☐ Not Guilty ☐ Fined ☐ Traffic School ☐ Dismissed

Nature of Violation	Location (street, city, state)

Date of violation

Action taken: ☐ Not Guilty ☐ Fined ☐ Traffic School ☐ Dismissed

Nature of Violation	Location (street, city, state)

Date of violation

Action taken: ☐ Not Guilty ☐ Fined ☐ Traffic School ☐ Dismissed

9.6

9.7 Have you been involved as the driver in a motor vehicle accident/collision within the past ten years?

○ Yes ○ No

Special Notes / Explanation:	

9.8 Additional Questions

9.8.1

9.8.2 Have you ever been refused automobile liability insurance or a bond, or had either of them canceled?

○ Yes ○ No

Special Notes / Explanation:	

9.9 ADDITIONAL NOTES OR EXPLANATION OF ANYTHING ABOVE

Additional Notes or Explanation

10) Other Topics

10.1 [redacted]

10.2 [redacted]

10.3 [redacted]

10.4 [redacted]

10.5 [redacted]

10.6 [redacted]

10.7 Are you able to perform the essential functions of the position, as described by the hiring agency, with or without reasonable accommodation? Do not provide medical, disability-related, genetic, or criminal-record information in your response. Contact the hiring agency separately if you need assistance with the application process.

○ Yes ○ No

Special Notes / Explanation:	

10.8 [redacted]

10.9 [redacted]

10.10 Do you know any other languages?

○ Yes ○ No

Special Notes / Explanation:	

ADDITIONAL NOTES OR EXPLANATION OF ANYTHING ABOVE

Additional Notes or Explanation

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 Personal History Statement. I hereby certify that I have personally completed each page of this form and any supplemental page(s) attached, and that all statements made are true and complete to the best of my knowledge and belief. I am aware that should an investigation disclose such misrepresentations, omissions, or falsifications in any documents I submit, or statements I make as part of the application, testing and/or hiring process, my application will be rejected and I will be disqualified from applying for any future position with the agency or agencies to which I have applied. If, after my acceptance for employment, subsequent investigation should disclose misrepresentation, omission, or falsification, it will be just cause for my immediate dismissal. 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 Personal History Statement.

SIGNATURE

By typing your full legal name below, you acknowledge and agree to the above certification.

Name (type your full legal name)	Date

WITNESS / BACKGROUND INVESTIGATOR

Complete the following signature section at a later date in the presence of a witness/background investigator.

Signature in full	Date

Background Investigator