PERSONAL HISTORY STATEMENT

Law Enforcement Agency _____ Month _____ Day _____ Year _____

INSTRUCTIONS: Fill out this questionnaire completely and accurately. All statements in your questionnaire are subject to verification. Incorrect statements may bar or remove you from employment. If space provided is inadequate, add additional pages and identify information by item number. If a question does not apply to you, indicate by writing N/A in the answer blank. Type or print legibly in all responses.

PERSONAL

1. NAME _____ _____/_____/_____
   First Middle Last Social Security Number

   Nicknames or Aliases _____

2. Height:_____ inches Weight:_____ lbs.

3. Present Mailing Address: _____
   Street & Number City State Zip Code

   Permanent Mailing Address: _____
   Street & Number City State Zip Code

   Telephone Number: Home: _____ Business: _____

4. Date of Birth: _____ Place of Birth: _____

5. Citizenship: ☐U.S. Born ☐U.S. Naturalized ☐Other-Specify_____

6. List organizations, clubs and associations of which you are or have been a member, or with which you are or have been associated.

   _____

   _____

7. List hobbies and/or special skills. _____

   _____

MARITAL

8. Marital Status (check one) ☐Single ☐Married ☐Divorced
   ☐Engaged ☐Separated ☐Widowed

9. Names of Spouse or Fiance(e) _____