**Police Applicant**

***Pre-Polygraph***

**INTEGRITY**

**Questionnaire**

Information contained in this booklet is to be reviewed only by authorized personnel.

 Applicants Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Applicants Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Have you taken a polygraph examination before? Yes No

 If yes, answer the following:

 When was it taken? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Where was it taken? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 For what department? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Who was the examiner? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **NOTE: Failure to *accurately* and *truthfully* complete this questionnaire in it’s entirety will be cause to disqualify the applicant from further consideration for employment.**