



Note to Applicant: Type or Print all Answers - All items must be answered fully. Include additional information for consideration on a separate sheet of paper if necessary.

Title Miss/Mrs/Mr (*DELETE AS APPROPRIATE*) **First Name**

Middle Name **Last Name**

Status Private/Government/Law Enforcement (*DELETE AS APPROPRIATE*)

Alias(es) Nicknames(s) or changes in name (other than by marriage)

Date of Birth (DD/MM/YY) /..... /..... **Place of Birth (Town/Country)**

Residence Address (Include post code)

.....

Business Address (Include post Code)

.....

Home Telephone **Business Telephone**

Send mail to Residence/Business (*DELETE AS APPROPRIATE*) **Fax**

Email **Website**

Present Occupation (If not self employed, indicate name and address of employer)

.....

Percentage of Time devoted to Polygraph work?

POLYGRAPH EXPERIENCE

Number of tests conducted **Total number of hours spent conducting these tests**

Please state how many of each of the following types of test you have conducted:

Specifics Pre Employment Screening General Screening Other

If you have been involved in teaching polygraph; in research or polygraph related matters; authored any publication pertaining to polygraph; or have any scientific or specific skills, please explain on a separate sheet of paper.

Date **State** **County of**



I,, after being duly sworn, do solemnly swear that I am the applicant named in this application and attachments thereto. I have read and understand the contents herein, and to the very best of my knowledge and belief, the foregoing answers and statements are both complete and true. I hereby grant authorization to the British Polygraph Association and/or their designated agents to contact any and every person and organisation for information regarding me. This authorisation includes the verification of any statement or statements made by me or about me, my employment history, my character, my department, my military history, or my conduct. I further agree that any misstatement or omission of fact will constitute sufficient grounds for rejection of my application, and/or termination from membership in the British Polygraph Association. A photocopy of this release shall be considered as effective and binding as the original hand executed copy. I FURTHER AGREE TO HOLD SAID BRITISH POLYGRAPH ASSOCIATION, ITS MEMBERS, EXAMINERS, OFFICERS AND AGENTS, FREE FROM DAMAGE, LIABILITIES OR COMPLAINT, BY REASON OF ANY ACTION THEY, OR ANY OF THEM TAKE IN CONNECTION WITH THIS APPLICATION.

Signed **Date**

Please return the completed application to:

Terry Mullins, Secretary, The British Polygraph Association, PO Box 388, Grays, Essex, RM17 9DE UK.

Please scan and email the documents along with APA school attended.

(Please remember to enclose copies of certificates)

