



North Carolina Polygraph Association

Application for Membership

NOTES TO APPLICANT: All items must be answered fully. If necessary, include any additional information for consideration on a separate sheet of paper. **Type or print** all answers.

APPLICANT INFORMATION:

Date of Application: _____

Name: _____ SS#: _____
LAST FIRST MI

Date of Birth: _____ Place of Birth: _____

Home Address: _____
STREET CITY STATE ZIP

Business / Agency Name: _____

Business Address: _____
STREET CITY STATE ZIP

Mailing address preference: Home Bus. Email: _____

Phone: Home _____ Business _____ Cell _____

Phone contact preference: Home Business Cell

I give NCPA permission to publish my name/contact information on our website: Yes No

ACADEMIC HISTORY: (Include only high school equivalents or higher)

DATES SCHOOL GRADUATE (Y/N) DEGREE

MILITARY SERVICE:

Branch: _____ Type of Discharge (if applicable): _____

Grade/Rank: _____ Dates of Active Duty: _____

BASIC POLYGRAPH TRAINING: (Attach a copy of your polygraph school certificate or diploma)

DATES	SCHOOL	LOCATION	TOTAL HOURS

POLYGRAPH EXPERIENCE:

Number of Tests: Specific Issue _____ Pre-Employment _____ Other _____

Current Status/Field: Government _____ Law Enforcement _____ Private _____

Percentage of time currently expended on polygraph related work: _____%

State License(s): _____

Other polygraph association/organization memberships: _____

Most recent refresher or seminar program attended: _____

Training / Research / Publications: _____

Equipment used: _____

Techniques used: _____

CHARACTER REFERENCES: (Include at least one polygraph examiner if possible; no relatives/employers)

1. Name: _____ Phone: _____

Address: _____

2. Name: _____ Phone: _____

Address: _____

3. Name: _____ Phone: _____

Address: _____

EMPLOYMENT HISTORY: (Last seven years only – current employer first)

COMPANY/AGENCY	DATES	SUPERVISOR	REASON YOU LEFT
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

BACKGROUND INFORMATION: (If yes to any questions, note explanation on a separate sheet of paper)

Have you ever been denied admission or expelled from a polygraph training facility? Yes No

Have you ever been denied admission or had your membership terminated from any professional polygraph organization? Yes No

Have you ever been refused a surety bond? Yes No

Have you ever been discharged or asked to resign from any place of employment? Yes No

Have you ever been detained, held, arrested, indicted, or summoned to court as a defendant in a criminal proceeding or convicted, fined, or imprisoned or placed on probation or have you ever been ordered to deposit bail or bond for the violation of any law or ordinance, excluding minor traffic violations for which a fine or forfeiture of \$25 or less was imposed? Yes No

Were you ever discharged from any branch of the military (U.S. Army, U.S. Navy, U.S. Marine Corps, U.S. Coast Guard) under other than honorable conditions? Yes No

Have you ever been convicted at a trial by courts-martial? Yes No

Have you ever had a polygraph license suspended or revoked? Yes No

MEMBERSHIP / APPLICATION FEES:

Please enclose a check or money order in the amount of \$75.00 (membership fee of \$50 and application fee of \$25.00), payable to the North Carolina Polygraph Association. **Note:** In the event your application for membership is not accepted, a refund of the \$50 membership fee will be provided.

Mail completed application, payment, and a copy of your polygraph school certificate/diploma to:

North Carolina Polygraph Association
c/o Martina W. Holmes, NCSBI
3320 Garner Rd., Bldg. 16
Raleigh, NC 27610

I have answered the above questions truthfully, and further, I agree to hold the North Carolina Polygraph Association, its members, examiners, officers, and agents, free from damage, liabilities, or complaint, by reason or any action they take in connection with this application.

Applicant: _____ Date: _____

Witness: _____ Date: _____

FOR OFFICE USE ONLY:

Date application received: _____ Date voted upon: _____ Approved: Yes _____ No _____

Notes / Explanations: _____