



MARSTON POLYGRAPH ACADEMY APPLICATION FOR ADMISSION

Form updated 1/5/19

Are you applying for the special All-Inclusive Deal
(Tuition/Equipment) offer? Yes No

I request to attend the following course(s): Basic Polygraph Examiner and PCSOT course combo** Start Date: (MM/DD/YYYY)
(Check one only)

PCSOT Course Only (Requires prior completion of APA-approved basic polygraph examiner course)

What is your full legal name? (First / Middle / Last Name(s))			
Home Address:			
City:	State/Province:	Postal Code:	Country:
Mobile Number:	Home Number:	E-mail address:	

REGISTRATION REQUIREMENTS

The American Polygraph Association sets the minimum criteria for student admission. Students shall have:

- ✓ No felony or misdemeanor convictions involving a crime of moral turpitude.
- ✓ Possess a bachelor's degree issued by or in the process of completing the requirements for a bachelor's degree in an area related to polygraph at a college or university accredited by a regional or national accrediting body and recognized by the US Department of Education or the Counsel for Higher Education Association OR,
- ✓ Have a minimum three years of investigative experience with a government, military, public, or private institution and a high school diploma or its equivalent.

	Name of School and City Where Located	Major	Units / Years Completed	Date Graduated
College/University				

	Name and Location (City/State) of Employing Agency	Dates of employment
Three years investigative experience		

EMPLOYMENT HISTORY

Name of current or last employer	Employed from:	Employed to:
Address of current or last employer. Street – City – State - Postal Code - Country		Phone Number:
What job do/did you perform for this employer?	Who is/was your immediate supervisor?	
If you are now not employed here, why did you leave?	May we contact this employer? Yes No	

****Note: The completion of the PCSOT course is OPTIONAL. Since the cost of the PCSOT course is included in the total cost of the basic course, the tuition would remain the same if you choose NOT to attend the PCSOT course.**

PERSONAL INFORMATION

Your Last name

Have you ever been convicted of any felony crime? (a felony conviction is an automatic bar to admission/enrollment.) > > > > > > > > > > > > > > >

Yes No

Have you ever been arrested for a misdemeanor which resulted in imprisonment? (A misdemeanor conviction which resulted in imprisonment may be a bar to admission/enrollment.) > > > > > > > > > > > > > > >

Yes No

Have you ever been denied membership in or been expelled from any professional group or organization? If yes, list organization and date: > > > > > > > > > > > > > > >

Yes No

PRIOR POLYGRAPH EDUCATION

Have you been admitted or failed to complete any polygraph school or polygraph training?

Yes No

If "YES", name of school and date: _____

REFERENCES

Please provide the names and telephone numbers of two references who know you personally and can speak to your personal character. Do not list relatives or former employers.

Reference: _____ Phone Number: _____

Reference: _____ Phone Number: _____

EMERGENCY NOTIFICATION

In the event you are admitted, whom should we notify, on your behalf, in the event of an emergency?

Name/Relationship: _____ Phone Number: _____

Name/Relationship: _____ Phone Number: _____

Is there anything you have not disclosed that we should know about? If yes, please explain:

Yes No

*Please sign here: _____ Date: _____

By digitally signing this application, I attest that all of information entered in this application is true and accurate to the best of my knowledge and will consent to a voluntary polygraph test, if requested, to verify this information. Initials _____

Additionally, I authorize representatives of Marston Polygraph Academy to verify all information provided by me in this application and approve the release of any and all records and information concerning me. I further authorize any firm, person, or government agency to release any requested information, and I release from liability any person who furnishes or obtains any information about me in connection with this form. Initials _____

I understand that Marston Polygraph Academy reserves the right to expel any current or potential student from any its courses, or deny the application for admission prior to start of a course, if it determined that I knowingly falsified, omitted, or provided misleading information in the application of admission process. Initials _____

*To sign application, enter your full name (as listed in this application) followed by the last four of your social security number, ie - John Doe 1234

Once completed, SAVE and email this completed application to info@marstonpolygraph.com.