

PERSONAL HISTORY STATEMENT

Instructions to the Applicant

• The information you provide in this Personal History Statement will be used in the conduct Threat Assessment aimed at determining the existence and extent of threat to your safety or security.

• Responses to all items and questions may be printed, typewritten and handwritten. If a question does not apply to you, write "N/A" (not applicable) in the space provided for your response. If you cannot obtain or remember certain information, indicate so in your response.

Disqualification

There are very few **automatic** bases for disqualification. Even issues of prior misconduct or even arrest or conviction will not automatically reject your application for the availment of protective security. However, deliberate misstatements or omissions can result to rejection of in your application, regardless of the nature or reason for the misstatements/omissions. In fact, the number one reason applicants are disqualified is because they deliberately withhold or misrepresent relevant information pertaining to personal circumstances that led to their being under threat.

BOTTOM LINE: Be as complete, honest and specific as possible in your responses.

I. PERSONAL DATA

FAMILY NAME	:	_____	CITY ADDRESS	:	_____
FIRST NAME	:	_____			_____
MIDDLE NAME	:	_____			_____
DATE OF BIRTH	:	_____	PROVINCIAL		_____
PLACE OF BIRTH:		_____	ADDRESS	:	_____
SEX	:	_____			_____
CIVIL STATUS :		BUSINESS			_____
NATIONALITY:		_____	ADDRESS	:	_____
RELIGION :		_____	CONTACT NR/S :		_____

II. FAMILY BACKGROUND

NAME OF FATHER : _____

NAME OF MOTHER : _____

NAME OF SPOUSE : _____

NAME OF CHILDREN : _____

III. EMPLOYMENT RECORD

(Indicate the name of the company and use separate sheet if necessary)

IV. BUSINESS/ES OWNED OR CO-OWNED

(Indicate the name/s of the address/es, use separate sheet if necessary)

V. CHARACTER REFERENCES

(Name at least three individuals known to you for the last 10 years)

<u>NAME</u>	<u>ADDRESS</u>	<u>TEL/CEL NUMBER</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

VI. MEMBERSHIP IN ORGANIZATION

(Indicate the name of the organization and use separate sheet if necessary)

VIII. NATURE AND PROBABLE CAUSE/PROOF OF THREAT

Cause of Threat	Specific Threat	Proof of Threat
_____	_____	_____
_____	_____	_____

IX. SUSPECT/S

X. BRIEF NARRATION OF INCIDENT

(Must be supported by Police Report or Blotter Excerpt)

CERTIFICATION

I HEREBY CERTIFY THAT ALL INFORMATION I STATED ABOVE ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Date Accomplished _____

Signature of Protectee _____