

DAVID MORGAN  
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## ESCAMBIA COUNTY SHERIFF'S OFFICE

Dictated: \_\_\_\_\_

Examiner: \_\_\_\_\_

### Pre-Employment Polygraph Worksheet

Video #: \_\_\_\_\_ Receipt Number: \_\_\_\_\_ Application Date: \_\_\_\_\_

Date: \_\_\_\_\_ Time in: \_\_\_\_\_ Directed By: \_\_\_\_\_

M T W Th F Time Out: \_\_\_\_\_ Position: \_\_\_\_\_

### THIS SECTION IS FOR OFFICIAL USE ONLY

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

DOB: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

How long at Address: \_\_\_\_\_ Phone: \_\_\_\_\_

D/L: \_\_\_\_\_ State: \_\_\_\_\_ Type Chauff/Oper: \_\_\_\_\_

Date Issued: \_\_\_\_\_ Date Expires: \_\_\_\_\_ Restrictions Y/N \_\_\_\_\_

Name/Address on D/L: \_\_\_\_\_

US Citizen: \_\_\_\_\_ (Native/Naturalized/Derived/Other) \_\_\_\_\_

Certificate # (If Naturalized): \_\_\_\_\_ Date: \_\_\_\_\_

Previous Polygraph or voice Stress Test: \_\_\_\_\_ When: \_\_\_\_\_ Where: \_\_\_\_\_

Why: \_\_\_\_\_

Do you Speak English? \_\_\_\_\_ Do you read English? \_\_\_\_\_

Do you understand English? \_\_\_\_\_ Hearing problem? \_\_\_\_\_

## EDUCATION

High school:

College:

High school graduate:

GED:

Year: \_\_\_\_\_ Where: \_\_\_\_\_

2 yr. Degree:

Degree:

Where: \_\_\_\_\_

In: \_\_\_\_\_

4 – 6 yr Degree:

Degree:

Where: \_\_\_\_\_

In: \_\_\_\_\_

Other colleges attended: \_\_\_\_\_

Other training / special skills: \_\_\_\_\_

Where did you attend the Law Enforcement Academy / Corrections Academy: \_\_\_\_\_

Dates of attendance: \_\_\_\_\_

Any special awards, special activities, or positions of class leadership: \_\_\_\_\_

Date / Location of FDLE exam: \_\_\_\_\_

Passed on first attempt:

2<sup>nd</sup> attempt:

3<sup>rd</sup> attempt:

Dual certification:

## MILITARY HISTORY

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Highest rank: \_\_\_\_\_ Rank at time of discharge: \_\_\_\_\_ Job: \_\_\_\_\_

Type of discharge: \_\_\_\_\_ Other \_\_\_\_\_

Early Out: \_\_\_\_\_ Reason: \_\_\_\_\_

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Court Martial: \_\_\_\_\_ Type: \_\_\_\_\_ Reason: \_\_\_\_\_

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Date of C / M: \_\_\_\_\_ Results: \_\_\_\_\_

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Article 15 / Captains Mass / Off hours: \_\_\_\_\_ Reason: \_\_\_\_\_

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Rejected by military: \_\_\_\_\_ Reason: \_\_\_\_\_

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Theft of government property: \_\_\_\_\_ Explain: \_\_\_\_\_

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Black market activities: \_\_\_\_\_ Explain: \_\_\_\_\_

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Most serious thing you did that was never discovered: \_\_\_\_\_

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Most serious thing you did and got caught: \_\_\_\_\_

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**ALCOHOL USAGE**

Drink on the job:

Drink during lunch:

Come to work after drinking / still felt the effects:

How often: \_\_\_\_\_ Where: \_\_\_\_\_

Have you ever been arrested or had any legal problems for drinking or anything related to your use of alcohol:

If yes, explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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**SUBVERSIVE / ORGANIZATIONAL ACTIVITIES**

Ever take part in any unlawful demonstrations:

Explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Ever been a member or associated with any subversive / hate / revolutionary groups:

Explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Ever been a member or associated with any gang:

Explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## ILLEGAL DRUGS / NARCOTICS

Ever used any illegal drugs to include marijuana:

Ever sold or participated in selling any illegal drugs: Explain: \_\_\_\_\_

Ever held / transported any illegal drugs for anyone: Explain: \_\_\_\_\_

Ever held a job where the use of any illegal drugs was common during working

hours: Where: \_\_\_\_\_

Ever work under the influence of any illegal drugs: How often: \_\_\_\_\_

Ever use any illegal drugs during lunch break: How often: \_\_\_\_\_

Ever use illegal drugs on the job: How often: \_\_\_\_\_

Ever operate a vehicle under the influence of any illegal drugs? How often: \_\_\_\_\_

Company vehicle:

Personal vehicle:

Currently associated with anyone who uses any illegal drugs: Explain: \_\_\_\_\_

Last time around illegal drugs: \_\_\_\_\_

<u>SUBSTANCE</u>	<u># TIMES USED</u>	<u>FIRST USED</u>	<u>LAST USED</u>	<u>FREQUENCY</u>
Marijuana	_____	_____	_____	_____
Cocaine	_____	_____	_____	_____
Crack	_____	_____	_____	_____
Meth	_____	_____	_____	_____
Ecstasy	_____	_____	_____	_____
Speed	_____	_____	_____	_____
Hashish	_____	_____	_____	_____
Angel Dust / PCP	_____	_____	_____	_____
Methadone	_____	_____	_____	_____
Heroin	_____	_____	_____	_____
Opium	_____	_____	_____	_____
Morphine	_____	_____	_____	_____
Steroids	_____	_____	_____	_____
Acid / LSD	_____	_____	_____	_____
Other	_____	_____	_____	_____

**ILLEGAL DRUGS / NARCOTICS (CONTINUED)**

**PRESCRIPTION DRUGS**

<b><u>SUBSTANCE</u></b>	<b><u># TIMES USED</u></b>	<b><u>FIRST USED</u></b>	<b><u>LAST USED</u></b>	<b><u>FREQUENCY</u></b>
Xanax	_____	_____	_____	_____
Loritab	_____	_____	_____	_____
Oxycontin	_____	_____	_____	_____
Soma	_____	_____	_____	_____
Other	_____	_____	_____	_____

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**ARREST CONVICTION HISTORY**

Ever been arrested: \_\_\_\_\_ (Juvenile or Adult) \_\_\_\_\_ Convicted of any crime: \_\_\_\_\_

Parole: \_\_\_\_\_ Probation: \_\_\_\_\_

<b><u>WHEN</u></b>	<b><u>WHERE</u></b>	<b><u>OFFENSE</u></b>	<b><u>DETAILS</u></b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever received a criminal citation or criminal summons (this does not include traffic citations): \_\_\_\_\_

Have you ever been fingerprinted for any reason other than military / pre-employment: \_\_\_\_\_

Have you ever been the suspect in any crime: \_\_\_\_\_ Explain: \_\_\_\_\_

Last time someone called the police for something you did: \_\_\_\_\_

Do you have any close friends, relatives, or immediate family members who are presently incarcerated in any correctional facility in the state of Florida? List: \_\_\_\_\_



## MOTOR VEHICLE DRIVING RECORD

# of tickets received in the past: \_\_\_\_\_ # of accidents you were involved in as a driver: \_\_\_\_\_

<u>CITATION FOR</u>	<u>YEAR</u>	<u>WHERE</u>	<u>RESULTS</u>
Stop light / sign	_____	_____	_____
Illegal turns	_____	_____	_____
Reckless driving	_____	_____	_____
Careless driving	_____	_____	_____
Failure to yield	_____	_____	_____
Improper backing	_____	_____	_____
Following to close	_____	_____	_____
DWI / DUI	_____	_____	_____
Speeding	_____	_____	_____
Speeding	_____	_____	_____
Speeding	_____	_____	_____
No seat belt	_____	_____	_____
Other	_____	_____	_____
Accident	_____	_____	_____
Accident	_____	_____	_____
Accident	_____	_____	_____
Accident	_____	_____	_____

How long have you had your driver's license: \_\_\_\_\_ State: \_\_\_\_\_

Driver's License ever: \_\_\_\_\_ Suspended: \_\_\_\_\_ Revoked: \_\_\_\_\_ Cancelled: \_\_\_\_\_

Reason: \_\_\_\_\_

Ever been refused a driver's license: \_\_\_\_\_ Explain: \_\_\_\_\_

Driver's license in other states: \_\_\_\_\_ Year: \_\_\_\_\_ Any still valid: \_\_\_\_\_

Are all vehicles owned by you or under your control insured to meet the minimum requirements: \_\_\_\_\_

Ever been denied car insurance: \_\_\_\_\_ Explain: \_\_\_\_\_

Ever had car insurance cancelled: \_\_\_\_\_ Explain: \_\_\_\_\_

How many times have you driven while intoxicated in the past 10 years: \_\_\_\_\_

Last time you drove when you were intoxicated: \_\_\_\_\_



**GENERAL THEFTS**

Have you ever bought or sold any stolen property:

Ever defrauded anyone:

First time shoplifted: \_\_\_\_\_ Date: \_\_\_\_\_ Item / \$: \_\_\_\_\_

Last time shoplifted: \_\_\_\_\_ Date: \_\_\_\_\_ Item / \$: \_\_\_\_\_

List the property or merchandise you have stolen from the places where you have worked: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List any other theft you have been involved in: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**GENERAL**

Have you ever caused the death or hospitalization of anyone:

Explain: \_\_\_\_\_

Describe the worst thing you ever did to someone: \_\_\_\_\_

\_\_\_\_\_

Know of anyone who would want to harm you for any reason:

Explain: \_\_\_\_\_

\_\_\_\_\_

Are there circumstances in your life that if known to the public would cause embarrassment for the Sheriff's Office:

\_\_\_\_\_

Have you worked for any Law Enforcement or Corrections Agency that you did not list on your application:

Where: \_\_\_\_\_

Any other pending / active applications with any other agencies:

Where: \_\_\_\_\_

\_\_\_\_\_