

Education

Name of School	Location	Dates from Month/Year	Dates to Months/Year	Courses	Degree or Diploma

	Yes / No
Were you ever dismissed, censured, suspended or expelled from a school, college or university?	
Have you ever been compelled to withdraw from a class or course for any reason?	
Have you ever been accused of Plagiarism?	
Have you ever assisted another person during an examination?	
Receiving assistance during an examination?	

I For each **Yes** answer write or type your version of the incident on a separate sheet of paper. Be sure to number your response to match the number of the particular question.

List any awards, honors, citations, positions held in school organizations, athletic endeavors, and any other special recognition you received while attending school:

Indicate your proficiency in each phase of each foreign language as “none”, “good”, or “fluent”.

Language	Speak	Understand	Read	Write
Spanish				
Other				

Provide your Massachusetts Drivers License and Expiration Date

Do you own or have access to a vehicle?

Make:	Model:	Registration:	State:
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Driving Record

	Yes / No
1. Have you ever received a written warning from a police officer?	
2. Have you ever received a citation from a police officer?	
3. Have you ever been involved in a motor vehicle accident in any state?	
4. If Yes, how many motor vehicle accidents have you been involved in?	# _____
5. Have you ever driven a vehicle while under the influence of alcohol or drugs?	
6. Do you now owe money for traffic fines?	
7. Do you now owe money for parking tickets?	
8. Do you now owe any money for excise taxes?	

I If you answered **YES** to question 5, write or type your version of the incident on a separate sheet of paper. Be sure to number your response to match the number of the particular question.

I If you answered **YES** to questions 6-7-8 please list below the towns or court jurisdictions and amounts.

Towns / Court Jurisdictions	Amount

I Note: You will not receive further consideration for appointment until you provide proof of payment of all outside traffic fines, parking fines and excise tax.

Employment Questions

	Yes / No
A. Have you ever, (or have you ever been accused of):	
B. Stolen from an employer?	
C. Lied to an employer about the number of hours you worked?	
D. Been paid for hours that you did not work?	
E. Punched another employee's time card?	
F. Reported to work under the influence of drugs and or alcohol?	
G. Had an accident while working?	
H. Fought physically or verbally with other employees?	
I. Been disciplined by an employer for any reason?	
J. Resigned from a job to avoid being fired?	
During the past three years approximately how many sick days did you use?	# _____

I For each **YES** answer to a question in this section, write or type your version of this incident on a separate sheet of paper. Be sure to letter your response to match the letter of the particular question.

Military Record

Yes / No

Have you ever served on active duty in the Armed Forces of the United States ?	_____
If YES , what is the highest rank attained? _____	

Branch of Military Service: _____	Serial Number: _____	
Type of Discharge: _____	Basis of Discharge: _____	Member of Reserve? Yes: _____ No: _____

Yes / No

Was any type of disciplinary action taken against you in the service?	_____
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ⓘ If **YES** please explain below

National Guard	Present <input type="checkbox"/>	Former <input type="checkbox"/>	None <input type="checkbox"/>
If you attend drills, meetings or camps, give the name of the unit and location:			

References

Name #1:	Address:	
Phone #:	Occupation:	
Business Address:		Phone #:
Number of Years Acquainted:		
Name #2:	Address:	
Phone #:	Occupation:	
Business Address:		Phone #:
Number of Years Acquainted:		
Name #3:	Address:	
Phone #:	Occupation:	
Business Address:		Phone #:
Number of Years Acquainted:		

Drug Use / Experimentation

Have you ever used or possessed the following substances?

	YES	NO		YES	NO
Marijuana			Psilocybin		
Cocaine			LSD		
PCP			Heroin		
Hashish			Morphine		
Methamphetamine			Any illegal drug		

Have you ever used or possessed the following prescription drugs without a prescription?

	YES	NO		YES	NO
Valium			Sleeping pills		
Barbiturates			Prescription diet pills		
Codeine			Amphetamines		

For each "YES" answer in this section, you are required to answer on a separate piece of paper the following questions:

- A. What form of the drug did you take? (crack, powder, pill)
- B. How was it administered? (smoked, sniffed, injected, etc.)
- C. When was the last date you used the drug?

Use of Alcohol

	YES	NO
Been involved in a fight while drinking?		
Been involved in an accident while drinking?		
Been taken into protective custody while drinking?		

A "YES" answer requires you to submit a written version of the incident(s) on a separate sheet of paper. Be sure to number your response to match the number of the particular question.

General Behavior

	YES	NO
Do you now, or have you ever gambled?		

If the answer to the above question is "YES", answer ALL of the questions below.

- 9 What types of gambling have you participated in? (Check all that apply)

Horse / Dog track	
Lottery	
Professional or College Sports	
Casino Games	
Card Games	
Football Cards	

How much do you spend on gambling per year? AMOUNT \$: _____

What is the largest sum of money you have won while gambling? AMOUNT \$: _____

What is the largest sum of money you have lost while gambling? AMOUNT \$: _____

How many times do you gamble per year?

- 1-5 6-10 More than 10 More than 30 More than 50

Have you ever borrowed money to cover a gambling debt? WHEN? _____ AMOUNT \$: _____

	YES	NO
1. Have you ever lied about gambling win or loss?		
2. Have you ever had sex with another person without their consent?		
3. Have you ever had sex with a person under the age of 16?		
4. Have you ever paid for sexual favors?		

If you answered "YES" to any question above, write your version of the incident on a separate sheet of paper. Be sure to number your response to match the number to that question.

	YES	NO
5. Is there anything about your life that could subject you to blackmail?		
6. Have you ever sued someone or have you ever been sued?		
7. Are there any incidents in your life (not previously mentioned) which you desire to explain?		

If you answered "YES" to Question 7, write your version of the incident on a separate sheet of paper. Be sure to number your response to match the number of the particular question.