



# UTAH POLYGRAPH ASSOCIATION

## MEMBERSHIP APPLICATION

**NOTE TO APPLICANTS: All items must be answered. Include all additional information for consideration on separate sheet of paper, if necessary. Please TYPE or PRINT all Answers**

Class of Membership Desired:

Active

Affiliate

Honorary

Retired

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

Home Address: \_\_\_\_\_  
Number and Street City State Zip

Work Phone: ( ) \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_

Employer: \_\_\_\_\_ Position/Title: \_\_\_\_\_

How long employed: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Email Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

PLEASE INCLUDE THIS INFORMATION ON THE UPA WEBSITE YES \_\_\_\_ NO \_\_\_\_  
(IF NO – HIGHLIGHT INFORMATION OR SUBMIT ANOTHER SHEET INDICATING WHAT SHOULD BE LISTED).

Polygraph School Attended: \_\_\_\_\_

Date Attended: From: \_\_\_\_\_ To: \_\_\_\_\_

What percent of your time is devoted to polygraph testing? \_\_\_\_\_

Number of Examinations Completed in the past three years \_\_\_\_\_

Specific Exams: \_\_\_\_\_ Pre-Employment Exams: \_\_\_\_\_

Membership in other Polygraph Associations: \_\_\_\_\_

Licenses held: \_\_\_\_\_ What State: \_\_\_\_\_

### HAVE YOU EVER BEEN:

- Convicted of a crime? \_\_\_\_\_
- Addicted to drugs, narcotics, alcohol or any medicines? \_\_\_\_\_
- Charged with a serious crime but never convicted? \_\_\_\_\_
- A member or associated with a group that advocated violence or terrorism? \_\_\_\_\_
- Required to register as a felon, sex offender or narcotic user? \_\_\_\_\_
- Refused membership in any polygraph association? \_\_\_\_\_
- Had your polygraph license ever been suspended, revoked or denied? \_\_\_\_\_
- Are you presently under indictment or investigation at this time? \_\_\_\_\_

**If you answered YES to any of the above question, please explain in detail on a separate sheet of paper and attach it to this application. Any information submitted will be held in strict confidence.**

Please read and sign the following and submit this application along with a check or money order for \$50.00 to cover for your first year dues.

Please also submit copies of diplomas from high school, college, and Polygraph School.

Please send the application, notarized agreement and other paperwork to:

Utah Polygraph Association  
Tana Stone  
43 West 9000 South, #B5  
Sandy, Utah 84070  
[Utahpolygraph@gmail.com](mailto:Utahpolygraph@gmail.com)

I agree to hold the Utah Polygraph Association, its members, examiners, officers, directors and agents free from damage, liabilities or complaints by reason of any action(s) taken in connection with this application. I authorize any person, agency, company or corporation to release any information in any file pertaining to me.

Applicant's Name (please PRINT): \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

State of \_\_\_\_\_, )

County of \_\_\_\_\_, )

Subscribed and sworn to before me this \_\_\_\_\_ date of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

My commission expires: \_\_\_\_\_

**Seal:**

Application Approved: \_\_\_\_\_

Application Denied: \_\_\_\_\_

\_\_\_\_\_  
President  
Utah Polygraph Association

Date: \_\_\_\_\_