

MONROE COUNTY, PENNSYLVANIA - OFFICE OF THE DISTRICT ATTORNEY PRIVATE DETECTIVE LICENSE BACKGROUND INFORMATION SHEET

Docket Numb	per													
Applicant	Information													
First Name		N	Middle Name			Last Name				Nickname				
Social Security Number			Date of Birtl			Place of Birth			Birth					
Home Phone Cel			hone			Work Phone	Email Address			il Addres	SS			
Driver's License Number			State		E	Expiration Date								
Current A	ddress				l									
House No.	Street Name				City				State	Zip		How Long (years)		
Previous Address if current address is less than five years														
House No.	Street Name				City				State Zip			How Long (years)		
Employme	ent Informati	on		<u> </u>					•					
Current Employer			Position			Contact Person			Telephone		ne	How Long (years)		
Previous Employer		Position				Contact Po	erson	Telepho			ne	How Long (years)		
Criminal Convictions □ Check if you have not been convicted of a crime as defined in PA Statutes Title 22 DETECTIVES § 16(b). If this block is not checked be prepared to discuss any criminal history you may have as defined in PA Statutes Title 22 § 16(b). Signature Block I certify that the information provide in this form is true and correct. I understand that providing misleading or misinformation is a violation of 18 Pa C.S. § 4904 Unsworn Falsification to Authorities.														
Applicant's Signature					 Date	<u> </u>								
For Office Use Only – below this line														
			tective Assigned				Background Results				Qualification	Qualifications Analysis		
							☐Cleared ☐Not Cleared			red	☐Qualified ☐Not Qualified			