## APPLICATION FOR CLEARANCE – NON-CITY EMPLOYEE PHILADELPHIA PRISON SYSTEM

Reason for applie	cation: (Indicate Re	eligio	us, edu	cationa	l, trea	ment stud	ent etc.)				
Affiliation/sponsoring organization:											
PERSONAL HISTORY (Please Print)											
Name A		Ado	Address (Include Zip			Code) How Lo		ng at Address			
Social Security No.		Но	Home Phone #			Work Phone #		Marital Status			
Height	Weight	/es		Hair	Hair Age Birth Date						
Aliases or Other Names by Which Known											
Arrest Re	Arrests)				Miscellaneous						
			Yes	No					Yes	No	
1. Have you ever been arrested?					5. Do you object to being finger printed?						
2. Have you ever been convicted?					6. Do you object to being photograph?						
3. Has any member of your family been convicted?					7. Do you use intoxicating liquors? (If "Yes", state extent below)						
4. Are you currently under any kind					8. Do you use, or have you used						
of Court Order-support or other					drugs? (If "Yes", state extent below)						
payments? 9. Explanation of "Yes", answers for Questions 1-4, 7 &							dicate ch	harge and di	snosition		
				EDUCA							
School/College Locati		atior	n Yea Atten From			Gradu Ye		,		e	
REFERENCES											
List 3 references other than relatives or former employers.											
Name and Position				anizatio		Addres		SS	Telephone		
In Case of Emerg	ionay Natify				Polo	tionship					
In Case of Emergency-Notify						Relationship:					
Address:					Telephone #:						
If granted the requested clearance, I agree to abide by the policy & procedures, rules and regulations of the Philadelphia Prisons System.											
(Signature of Applicant)							(Date)				