

Personal History and Resume Form

Note: The Personal History and Resume Form needs to be filled out for each person who is a 20% or greater owner of the Operating Company or Holding Company, as well as anyone who is an officer or director of said companies.

PERSONAL HISTORY			
Company Name			
Your Name (First, Middle, Maiden, Last)			Social Security No.
Identify all prior names used since birth and indicate the year of the change			
Date of Birth	Place of Birth	Race	Gender
Home Address (Street, City, State, Zip)			
At Current Address From:		to present	Email
Home Phone	Business Phone	Fax	
Previous Address (Street, City, State, Zip)			
From		To	
Spouse's Name (First, Middle, Maiden, Last)			
Date of Birth	Place of Birth	Race	
Are you employed by the US Government? If yes, give name of agency and position: <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you a US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently under indictment, on parole or probation? If yes, indicate the date that parole or probation is to expire: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been charged with and/or arrested for any criminal offense other than a minor motor vehicle violation? Include offenses which have been dismissed, discharged, or not prosecuted (all arrests and charges must be disclosed and explained on an attached, signed sheet). <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been convicted, placed on pretrial diversion, or placed on any form of probation, including adjudication withheld pending probation, for any criminal offense other than a minor vehicle violation? <input type="checkbox"/> Yes <input type="checkbox"/> No			

MILITARY SERVICE BACKGROUND

Branch	From	To
Rank At Discharge	Honorable?	<input type="checkbox"/> Yes <input type="checkbox"/> No

WORK EXPERIENCE (list chronologically, beginning with present employment. Please account for last 10 years)

Name of Company	% of Business Owned
Full Address (Street, City, State, Zip)	
Title	From To
Duties	

Name of Company	% of Business Owned
Full Address (Street, City, State, Zip)	
Title	From To
Duties	

Name of Company	% of Business Owned
Full Address (Street, City, State, Zip)	
Title	From To
Duties	

EDUCATION

Name of School	Attended From	To
Major	Degree	
Comments		

Name of School	Attended From	To
Major	Degree	
Comments		