



KNOXVILLE POLICE DEPARTMENT

Personal History Questionnaire Instructions

You are about to complete a Personal History Questionnaire for a position with the Knoxville Police Department. Please follow these instructions to ensure that your PHQ is accurate. There are moral and legal obligations to complete this Personal History Questionnaire in a truthful and fully informative manner.

You must answer ALL questions honestly, even if you feel there is something in your past that reflects poorly on you. The matter may or may not be disqualifying, but making false statements or intentionally omitting facts always results in disqualification. It is to your advantage to answer questions openly and honestly. Please be advised that all information is subject to verification via home visits, source documentation, polygraph, background investigations, etc.

The following instructions serve as a guide to filling out this questionnaire:

- Do not allow anyone else to fill out this questionnaire for you. Other people may not know the answers to questions, and omissions will result in disqualification.
- Please type your answers in the areas provided. Hand written forms will NOT be accepted. This is a PDF form, please download and complete it electronically. You must sign it and upload it with your application **AS A PDF**. Images will not be accepted.
- Please be sure to include complete and accurate information (full names, phone numbers, current addresses, e-mail addresses). Do NOT ASSUME that background investigators will attempt to determine information.
- It is mandatory to answer each question on the questionnaire. If something does not apply to you, type N/A in the space provided.
- If you cannot remember information then indicate that in the space provided. (Example: *"For question 36, I cannot remember the exact date of my last citation, but I remember receiving it in Knoxville, TN"*). Explanations should be typed on blank pages.
- All previous drug use is not automatically disqualifying. Remember, BE HONEST.
- Be sure to save a copy of the PHQ for your records.
- Be sure to list ALL of your previous employers in the last 10 years. Even if you worked there for one day.
- Be sure to sign the PHQ. You must also complete the 3 release forms at the end of the packet. You must print all documents that require a notary and take them to a notary and have them notarized. You must scan them and upload them with your application as PDFs. Images will not be accepted.

REMEMBER:

- 1) ALL documents in this packet must be completed.
- 2) All documents requiring a notary must be notarized prior to upload.
- 3) All completed and notarized documents must be uploaded with your application as PDF documents (images will not be accepted).

Failure to follow these procedures will result in disqualification of your application.

DO NOT email us your documents. Emails will not be accepted. All documents must be uploaded with your application.

If you need assistance, you can come to the Civil Service office and we will assist you with notarizing, scanning, and uploading your documents.

We are located at 400 Main St. in the City County Building,
Suite 569, Knoxville, TN 37902.

You can call (865) 215-2106 for assistance.



KNOXVILLE POLICE DEPARTMENT

- If you need to change/update information on this form after it has been turned in, please contact the HR Department at 865-215-3100

Representatives of the City of Knoxville will primarily communicate with you by e-mail. Be sure to check your e-mail often, including your SPAM folder.

Again, please be sure to be completely transparent and honest when filling out this document.



KNOXVILLE POLICE DEPARTMENT KNOXVILLE, TENNESSEE



Applicant's Full Name: _____ Phone Number: _____

Thank you for applying with the City of Knoxville ("City") to join the Knoxville Police Department, an Equal Opportunity Employer and a CALEA Accredited Agency. Attached is your Personal History Questionnaire Applicant Agreement and Personal History Questionnaire.

It is to your advantage to **BE ABSOLUTELY TRUTHFUL** in answering all questions on the Personal History Questionnaire and during all interviews. If you have any questions, please call the City's Department of Human Resources at (865) 215-3158.

SUMMARY OF NEXT STEPS

- Your failure to comply with the instructions stated in the Personal History Questionnaire Applicant Agreement may subject you to disqualification. Read these instructions carefully, and ask for clarification, if needed. If disqualified, you cannot repeat the hiring examination process for 6 months.
- The Personal History Questionnaire, including all attachments, is due on the day you submit your application.
- Type an answer to every question. If a question does not apply to you, indicate so by typing "N/A." If you are unsure if a question applies to you, please contact the Recruitment Team.
- If you answer "yes" to a question that requires a detailed explanation, use the appropriate explanation boxes (and additional pages, if necessary) to provide details.
- List complete email addresses, physical addresses (to include number, street, city, state, and zip code), and telephone numbers (to include area codes).
- Before submitting this form, signature pages 2, 3, 24 and 25 must be signed and/or notarized. All signatures must be affixed in the presence of a Notary Public.
- Do not falsify or omit any material facts. All answers are subject to verification.
- Update the City's Department of Human Resources within 48 hours of any change of information you provided on the Personal History Questionnaire.

PERSONAL HISTORY QUESTIONNAIRE APPLICANT AGREEMENT

I, the undersigned applicant for a position with City of Knoxville ("City") in the Knoxville Police Department, hereby agree to the following (please initial each section):

I understand that the City must receive my completed Personal History Questionnaire with my application; that the failure to meet this deadline may subject me to disqualification; and that, if disqualified, I cannot repeat the hiring examination process for 6 months.

I understand that I must type a complete answer to every question on the Personal History Questionnaire (or type "N/A" if a question is not applicable to me); that submitting a Personal History Questionnaire with blank or incomplete responses may subject me to disqualification; that a Personal History Questionnaire submitted with blank or incomplete responses will not be processed; and that, if disqualified, I cannot repeat the hiring examination process for 6 months.

I understand that I may be asked to provide information or documentation in addition or in response to the information submitted on the Personal History Questionnaire; that, if information or documentation is requested, I will be required to provide such requested information or documentation within a specified time period; that the failure to meet this deadline may subject me to disqualification; and that, if disqualified, I cannot repeat the hiring examination process for 6 months.

I understand that I must update the City's Department of Human Resources within 48 hours of any change to any information I provided on the Personal History Questionnaire, including, but not limited to, changes to the following: name, telephone numbers, addresses, places of employment/work history, interactions with law enforcement officers (including, but not limited to, reports that are matters of record, traffic stops, tickets, citations, arrests, interviews, requests for information, etc.), criminal charges, or civil litigation; that the failure to timely notify the Department of Human Resources of such changes may subject me to disqualification; and that, if disqualified, I cannot repeat the hiring examination process for 6 months.

I hereby acknowledge that I have read and fully understand each of the statements contained hereinabove; that I had the opportunity to ask for clarification of each of the statements; and that my signature was not placed hereon until I fully understood each statement.

Name of Applicant

Date

Signature of Applicant

NOTARY ACKNOWLEDGEMENT

STATE OF _____

COUNTY OF _____

Personally appeared before me the undersigned, a duly commissioned Notary Public in and for the County and State aforesaid, and who acknowledged that they executed the within instrument for the purposes therein contained.

Witness my hand at office this the _____ day of _____, 20_____.

Notary Public

My Commission Expires: _____

PERSONAL HISTORY QUESTIONNAIRE

**Be sure to read every question carefully and answer truthfully.
 The falsification or knowing omission of any material fact is cause for
 automatic disqualification from employment with KPD for 5 years.**

This form must be TYPED, printed, and brought with you to the written exam.

SECTION 1: TO BE RETAINED BY DEPARTMENT OF HUMAN RESOURCES AND PROVIDED TO KPD INTERNAL AFFAIRS UNIT AND KPD PERSONNEL SECTION.

Please Check Position You Are Applying For:

POLICE OFFICER **POLICE CADET** **OTHER** (Specify) _____
 (18 - 21 Years of Age)

1. _____
 NAME: LAST FIRST MIDDLE

ADDRESS: STREET NAME APARTMENT NO. CITY STATE ZIP

HOME PHONE CELL PHONE EMAIL

Date of Birth: _____ Place of Birth: _____ Social Security #: _____

Driver's License Number: _____ State: _____

Do you have any of the following personal social media web pages/sites?

___ Facebook; social media handle: _____

___ Twitter; social media handle: _____

___ LinkedIn; social media handle: _____

___ Snapchat; social media handle: _____

___ Other; please list platform and handle: _____

2. Have you ever gone by a different name? (i.e. nickname, maiden name, name change) Yes No

If you answered yes, give name and explain: _____

Relatives (attach additional sheets if necessary)

3. Please list ALL previous addresses, **add dates you lived at each address**, and whom you lived with during the last 10 years. (Include relatives other than parents). Use blank pages 13 and 14, if needed.

Name: _____

Address: _____

Dates: _____

NAME: LAST FIRST MIDDLE

LAST 4 SSN

Name: _____

Address: _____

Dates: _____

Name: _____

Address: _____

Dates: _____

Name: _____

Address: _____

Dates: _____

Name: _____

Address: _____

Dates: _____

Name: _____

Address: _____

Dates: _____

Name: _____

Address: _____

Dates: _____

(Attach additional information to pages 13 and 14, if necessary)

SECTION 2: TO BE RETAINED BY DEPARTMENT OF HUMAN RESOURCES AND PROVIDED TO KPD INTERNAL AFFAIRS UNIT AND KPD PERSONNEL SECTION.

Education

4. High School Graduate? Yes No GED

Name of High School and Location: _____

5. College Graduate? Yes No Degree _____

Name of School: _____

If no degree, approximate number of credits: _____

6. Other technical training related to law enforcement:

Law Enforcement Experience

7. What other law enforcement agencies do you currently have applications with?

8. Were you ever rejected for employment by another law enforcement agency? Yes No

If yes, explain (attach additional sheets if necessary):

Date: _____

Agency: _____

Date: _____

Agency: _____

9. Have you ever been employed by other law enforcement agencies? Yes No

If you answered yes, give name and exact dates: (attach additional sheets if necessary)

Agency: _____

Dates of Employment: _____

Reason for Separation: _____

NAME: LAST FIRST MIDDLE

LAST 4 SSN

10. If previously employed in law enforcement, did you ever receive any disciplinary actions?

Yes

No

If yes, explain (attach additional sheets if necessary) or use blank pages 13 and 14, if needed:

Agency: _____

Date of Discipline: _____

Disciplinary Action: _____

Reason for Action: _____

Employment

11. How long do you expect to be with this department? _____

12. What are your career goals?

13. Describe your work ethic:

14. Have you ever applied for employment with the City Knoxville?

Date: _____ Position _____ Hired: Yes No

15. Were you ever fired or dismissed from a job? Yes No

If you answered yes, explain: (Attach additional sheets if necessary)

Company: _____ Date of Termination/Dismissal: _____

Explanation:

16. Did you ever quit before you were about to be fired? Yes No

If you answered yes, explain:

Company: _____ Date: _____

17. Were you ever reprimanded by any supervisor for being late or absent? Yes No

Company: _____ Date: _____

If you answered yes, explain:

NAME: LAST FIRST MIDDLE

LAST 4 SSN

COMPANY NAME: _____
ADDRESS: _____ STREET _____
CITY/STATE: _____ ZIP CODE _____
PHONE# _____ SUPERVISOR: _____ EMAIL: _____
EMPLOYMENT DATES: _____ POSITION HELD: _____

COMPANY NAME: _____
ADDRESS: _____ STREET _____
CITY/STATE: _____ ZIP CODE _____
PHONE# _____ SUPERVISOR: _____ EMAIL: _____
EMPLOYMENT DATES: _____ POSITION HELD: _____

COMPANY NAME: _____
ADDRESS: _____ STREET _____
CITY/STATE: _____ ZIP CODE _____
PHONE# _____ SUPERVISOR: _____ EMAIL: _____
EMPLOYMENT DATES: _____ POSITION HELD: _____

COMPANY NAME: _____
ADDRESS: _____ STREET _____
CITY/STATE: _____ ZIP CODE _____
PHONE# _____ SUPERVISOR: _____ EMAIL: _____
EMPLOYMENT DATES: _____ POSITION HELD: _____

COMPANY NAME: _____
ADDRESS: _____ STREET _____
CITY/STATE: _____ ZIP CODE _____
PHONE# _____ SUPERVISOR: _____ EMAIL: _____
EMPLOYMENT DATES: _____ POSITION HELD: _____

Driving Record

23. Do you have a current valid driver’s license? Yes No

License Number _____ Class of License _____ State _____

24. List all traffic accidents you have had as the operator of a vehicle in the last 5 years. **Include dates**, if investigated by police, and if ticket was issued as a result of the accident.

VIOLATION	DATE (MM/DD/YYYY)	STATE/ AGENCY	DISPOSTION

25. Had you been drinking before any of the accidents occurred? Yes No

If you answered yes, explain:

26. Have you ever been involved in a hit and run accident? Yes No

If you answered yes, explain:

27. Do you have any pending lawsuits because of an accident? Yes No

If you answered yes, explain:

28. Have you ever possessed a driver’s license from another state? Yes No

If yes, which state (s):

NAME: LAST FIRST MIDDLE

LAST 4 SSN

35. Have you ever **Committed** or **Participated** in, or conspired to commit any of the following serious crimes: ANSWER **YES** OR **NO** IN EACH SPACE

Murder _____

Theft _____

Rape _____

Robbery _____

Manslaughter _____

Arson _____

Sex Crimes _____

Burglary _____

Aggravated Assault/Felony Assault _____

Other - (Explain):

36. Have you ever been convicted of any crime as a juvenile?

Yes

No

If yes, explain (when, where, charge):

37. As a juvenile, did you ever have to report to a juvenile probation officer?

Yes

No

If yes, explain:

NAME: LAST FIRST MIDDLE

LAST 4 SSN

BLANK PAGE FOR COMMENTS AND EXPLANATIONS FROM PREVIOUS QUESTIONS

A large, empty rectangular box with a thin black border, intended for providing comments and explanations from previous questions.

NAME: LAST FIRST MIDDLE

LAST 4 SSN

BLANK PAGE FOR COMMENTS AND EXPLANATIONS FROM PREVIOUS QUESTIONS

A large, empty rectangular box with a thin black border, occupying most of the page. It is intended for the test-taker to provide comments and explanations for their previous answers.

- 38. Were you ever suspended from school? Yes No
- Were you ever expelled from school? Yes No

If yes, explain (when, where, name of school):

- 39. Have you ever been arrested as an adult? Yes No

If yes, explain:

Date: _____ Charge: _____ Disposition: _____

- 40. Do you have any criminal charges, as a juvenile or adult that have been **expunged** or dismissed? Yes No

If yes, explain (when, where, charge):

Date: _____ Where: _____ Charge: _____

- 41. Have you ever been served a summons to appear in court? Yes No

If yes, explain (when and where):

Date: _____ Where: _____

- 42. Have you ever been in jail, prison or any type of correctional facility because of a **motor vehicle charge** or **criminal charge**? Yes No

If yes, explain (when, where, charge):

Date: _____ Where: _____ Charge: _____

- 43. Have you ever appeared in court as an accused? Yes No

If yes, explain (when, where, charges):

Date: _____ Charge: _____ Disposition: _____

44. Did you ever steal anything valued at \$200 or more, including from an employer? Yes No

If yes, explain (what, when, where): Date: _____

Explanation:

45. Did you ever steal anything valued at under \$200, including from an employer? Yes No

If yes, explain (what, when, where): Date: _____

Explanation:

46. Check all that apply:

- | | | | |
|-----------------|--------------------------|-----------------------|--------------------------|
| Shoplifting | <input type="checkbox"/> | From Other Person | <input type="checkbox"/> |
| Money | <input type="checkbox"/> | From Employer(s) | <input type="checkbox"/> |
| Merchandise | <input type="checkbox"/> | From Residence | <input type="checkbox"/> |
| Office Supplies | <input type="checkbox"/> | From Parents/Relative | <input type="checkbox"/> |
| Government | <input type="checkbox"/> | Received Stolen Goods | <input type="checkbox"/> |

47. Have you ever been placed on parole or probation? Yes No

If yes, explain:

48. Do you presently owe any money on court fines? Yes No

If yes, explain:

49. Have you ever caused the death of another person? Yes No

If yes, explain:

50. Have you ever accompanied others while they engaged in any criminal act? Yes No

If yes, explain:

51. Have you ever committed perjury? Yes No

If yes, when and where:

Date: _____ Where: _____

Explain:

52. Have you deliberately damaged or destroyed the property of an employer? Yes No

If yes, explain:

Military

53. List all military service. Include branch and exact entrance and discharge dates:

54. While in the military, did you receive any type of punishment(s)? Include fines, extended duty time, loss of leave, loss of rank, etc. Also type of hearing. (when, where) Yes No

If yes, give brief description of charges and punishment:

55. Did you receive an honorable discharge? Yes No

If no, type of discharge: _____

56. Did you complete your entire enlistment period? Yes No

If yes, explain why, when, where:

Date: _____ Where: _____

57. Were you ever in a Reserve or National Guard Unit? Yes No

If yes, give exact dates and location of unit:

Date: _____ Where: _____

58. Were you ever turned down by any military unit? Yes No

If yes, explain why, when, where:

Date: _____ Where: _____

59. Did you ever steal anything from the military? Yes No

If yes, explain what, when, where:

Date: _____ Where: _____

What:

60. Were you discharged under a condition which prohibits your reenlistment? Yes No

Did you receive an Honorable Discharge? Yes No

If no, explain?

Drugs - Note – Drugs include any federally illegal drugs and illegal drugs in the state of Tennessee.

61. Have you ever violated the law by the illegal use of any of the following drugs as an adult or juvenile?

ANSWER YES OR NO TO EACH DRUG LISTED. If yes, a detailed explanation **MUST** be given.

DRUG USED	Y	N	DATE OF FIRST USE (MM/DD/YYYY)	DATE OF LAST USE (MM/DD/YYYY)	MAXIMUM TIMES USED	HOW DRUGS WERE USED	NUMBER OF TIMES PURCHASED
Marijuana							
Hashish							
PCP							
Angel Dust							
Amphetamines							
LSD							
Peyote							
Mescaline							
Heroin							
Cocaine							
Quaaludes							
Downers							
Tranquilizers							
Percocet							
Hydrocodone							
Ecstasy/XTC							
Darvocet							
Dilaudid							
Ketamine							
Speed							
Inhalants							
Methamphetamine							
Mushrooms							
Xanax							
Crack							
Oxycodone							
Ambien/Lunesta							
Anabolic Steroids							
Synthetic Cannabinoids							
Bath Salts							
Other:							

Explanation:

62. Have you ever been convicted for the possession of or the use of any of the above listed drugs?

Yes No

If yes, explain:

63. Have you ever been arrested for any drug violation(s)?

Yes No

64. Did you ever sell any type of illegal drug?

Yes No

If yes, explain, and include dates:

65. Have you ever bought any type of illegal drug?

Yes No

If yes, what date? _____

If yes, how often? _____

If yes, largest amount ever purchased? _____

If yes, explain:

71. Are you now, or have you ever been, a member or associate of a criminal enterprise, street gang, social group, or any other group that advocates violence against individuals, because of their race, religion, political affiliation, ethnic origin, nationality, gender, sexual preference, or disability? Yes No

If yes, explain:

72. Have you filled in each blank on this questionnaire and given complete addresses, area codes, zip codes, and phone numbers? Yes No
73. Write a couple of paragraphs on why you want to become a Knoxville Police Officer. Also, explain the largest issue facing law enforcement and the Knoxville Police Department today and how would you personally address these issues.

List five (5) personal references (include **complete** names, addresses and phone numbers, **including zip codes and area codes**). **Please verify that their emails are correct.**

NOTE: A reference is someone that **IS NOT** related to you, who knows you well enough to vouch for your character.

74. Name: _____ Phone: _____
Email: _____ Relationship: _____
Address: _____

75. Name: _____ Phone: _____
Email: _____ Relationship: _____
Address: _____

76. Name: _____ Phone: _____
Email: _____ Relationship: _____
Address: _____

77. Name: _____ Phone: _____
Email: _____ Relationship: _____
Address: _____

78. Name: _____ Phone: _____
Email: _____ Relationship: _____
Address: _____

Please sign below electronically or with an ink pen.

I certify that all answers to the above questions are true, complete, and correct, and I understand that the falsification or knowing omission of any material fact is cause for automatic disqualification from employment with the Knoxville Police Department for 5 years.

Signature

Date

AUTHORIZATION TO RELEASE INFORMATION AND FAIR CREDIT REPORTING ACT DISCLOSURE

DISCLOSURE

In connection with your application for employment (“**Application**”), the City of Knoxville, including its Department of Human Resources, its Police Department, and/or its Civil Service office, and its authorized agents (collectively, “**City**”) may verify information within the Application or other materials relating to your prospective employment. As part of that verification process, the City may seek information directly or through a background check vendor, including an investigative consumer report (“**Background Check Report**”) on you as defined in the Fair Credit Reporting Act (“**Act**”).

For City purposes, a Background Check Report will consist of a criminal background check, employment verification, education verification, reference check, public records check, driving records check, and professional license check. **It will not necessarily include a credit check**, although information that pertains to your credit may be contained among public records (e.g., bankruptcy filings). The information obtained in the Background Check Report will be utilized only during the initial employment application process. In the event that information from the Background Check Report is utilized in whole or in part in making an adverse decision on your Application, before making the adverse decision, we will provide to you a copy of the Background Check Report and a description in writing of your rights under the Fair Credit Reporting Act, 15 U.S.C. § 1681 *et seq.*

AUTHORIZATION

By my signature below, I expressly authorize and instruct the City and/or its background check vendor to perform and release to the City a Background Check Report on me at the request of the City in conjunction with my Application. I understand that, to the extent allowed by law, information contained in my Application or otherwise disclosed by me, if any, may be used for the purpose of conducting a Background Check Report.

By my signature below, I also authorize the disclosure to the City and/or its background check vendor of information concerning my employment history, earning history, education, motor vehicle history, character, general reputation, criminal history, and all other publicly available information the City deems pertinent by any individual, corporation, or other private or public entity, including without limitation the following: employers; learning institutions, including colleges and universities; law enforcement agencies; federal, state and local courts; the military; motor vehicle records agencies; and other public sources. I hereby RELEASE and hold the City and its background check vendor, their respective officers, directors, employees, and agents, harmless from any and all liability with respect to the Background Check Report, investigations, verifications, and/or the use of any information relevant to my Application and employment.

By my signature below, I acknowledge that this Disclosure and Authorization Form, in original, faxed, photocopied or electronic form, will be valid for any reports that may be requested by the City or its background check vendor, as the case may be.

Signature of Applicant: _____ Date: _____

Print Full Name: _____ Social Security #: _____

Other Names Used (alias, maiden, nickname) _____

Driver’s License Number _____ State Issued _____ Date of Birth: ____ / ____ / ____

Current Residence Address: _____

(Number & Street) _____ City _____ State _____ Zip _____

List all Residence Addresses in Past 7 Years (attached additional sheets if necessary)

Subscribed before me this _____ day of _____, 20____

Signature of Notary: _____ My Commission Expires: _____

RELEASE OF LIABILITY PHYSICAL FITNESS ACTIVITIES AND TRAINING

THAT I, _____, *(print or type your full name)* for valuable and sufficient consideration, being the opportunity to apply for and be considered for employment by the City of Knoxville, Tennessee, do by these presents for myself, my heirs, executors, and administrators, hereby remise, release, and forever discharge the City of Knoxville, Tennessee, of and from any and all manner of action or actions, cause or causes of action, suits, liability for personal injury or death or property damages incidental thereto, including, but not limited to, medical bills, life earnings, pain and suffering, claims and demands whatsoever, in law or equity, which against the City of Knoxville or its employees, servants, agents, or representatives I have had, now have, or which I may have on account of my taking and participating in a physical performance test given by the City of Knoxville, physical performance test preparations, physical fitness activities and training, and anything incidental thereto, or which my heirs, executors, or administrators hereafter can, shall, or may have, for or by reason of any matter, cause or thing whatsoever from the date of these presents forward.

FURTHERMORE, I realize the potential danger and hazard in the aforementioned test, and anything incidental thereto, and therefore I hereby voluntarily assume all risks and dangers to both my health, life, and property regardless of the nature or method of creation of such risks and dangers, and do hereby agree to release and indemnify the City of Knoxville, its employees, servants, agents, and representatives from any and all liability attributable to said City and/or its employees, servants, agents, or representatives as a result of my participation in the aforementioned physical performance test, physical performance test preparations, and physical fitness activities and training. Further, I hereby bind my heirs, executors, administrators, and assigns to said assumption and agreement of indemnification. It is hereby expressly understood and agreed that this release of liability shall apply to any and all claims which may arise from any source whatsoever, including but not limited to, any possible actions of the City of Knoxville, or its employees, servants, agents, or representatives.

IT IS my intent in agreeing to the above provisions that neither the City of Knoxville nor any of its employees, servants, agents, or representatives be held liable or be required to expend any monies for any reason whatsoever in regard to my participation, involvement, or connection with the physical performance test and preparation, physical fitness activities and training, or anything incidental thereto.

IN WITNESS THEREOF, I have hereunto set my hand and seal this _____ day of _____, 20_____.

Applicant Signature

Date

Signature of Parent/Legal Guardian (if applicable)

Date

Witness Signature

Date

This Release of Liability must be signed and dated by the applicant, and witnessed. IT DOES NOT HAVE TO BE NOTARIZED. If the undersigned is less than eighteen (18) years of age, a parent or other legal guardian must execute this form on behalf of the undersigned.