National Polygraph Academy

1890 Star Shoot Parkway • Suite 170-366
Lexington, KY 40509 • 859-494-7429

ENROLLMENT APPLICATION

(Jackson Springs, NC • Deadline: March 19, 2027)

PERSONAL INFORMATION:

Name: _____
(First) (Middle) (Last)

Address: _____
Street City State Zip

Cell Phone Number: (_____)_____ DOB: _____/_____/_____

Work Phone Number: (_____)_____ Age: _____ Gender: ☐ M ☐ F

Email Address: _____ Marital Status: _____

Best way to reach you: _____ U.S. Citizen: ☐ Yes ☐ No

Have you ever been convicted of a felony or a crime involving moral turpitude? ☐ Yes ☐ No

***If yes**, please explain on the back of this sheet.*

☐ Yes ☐ No Have you ever taken a polygraph test before?

If yes, when? _____

What was the reason? _____

MILITARY SERVICE:

Branch: _____ Highest Rank: _____

Enlistment Date: _____/_____/_____ Discharge Date: _____/_____/_____

Type of Discharge: _____

If less than honorable, please explain on the back of this sheet.

Have you ever received any type of disciplinary action while in the military (court martial, article 15, reprimand)? ☐ Yes ☐ No ***If yes**, please explain on the back of this sheet.*

AFFILIATIONS:

Please list any clubs or organizations of which you are a member:

_____

_____

EMPLOYER / AGENCY INFORMATION:

Name of Agency: _____

Position / Title: _____ Hire Date: _____/_____/_____

Agency Address: _____
Street City State Zip

Agency Phone Number: _(_____)_____ Name of Supervisor: _____

Total Years Law Enforcement Service: _____ Years Investigative Experience: _____

Have you graduated from a law enforcement basic training academy? ☐ Yes ☐ No

If yes, what year did you graduate? _____ Name of Academy: _____

1. ☐ Yes ☐ No Is polygraph currently used by your agency?

2. ☐ Yes ☐ No Does your agency already employ a polygraph examiner?
   If yes, what is that examiner's name? _____
   What polygraph school did they graduate from? _____
   What test formats does your agency use? _____

3. ☐ Yes ☐ No Have you ever submitted an application to another polygraph school?
   If yes, when? _____
   Name of school you applied to: _____

4. ☐ Yes ☐ No Does your state have any laws/regulations regarding polygraph administration?
   If yes, please submit a copy along with this application.

5. ☐ Yes ☐ No If employed in a state requiring an internship, has your agency made arrangements as to who will be your intern polygraph supervisor?
   If yes, who? _____

6. Please check the type of polygraph instrument you will use at your agency:

   ☐ Axciton ☐ Lafayette ☐ Stoelting ☐ Limestone ☐ Unsure at this time

7. ☐ Yes ☐ No Will you be bringing your own agency polygraph instrument? It is strongly encouraged that each student bring their own instrument.

***** If you or your department will be purchasing an instrument for the course, please advise the manufacturing company that you are an enrolled student with the National Polygraph Academy as additional discounts will apply with select manufacturers. If you have questions about instrument selection and/or available discounts, please feel free to contact Pam Shaw at shaw.national@gmail.com or by phone at 859-494-7429.***

EDUCATION:

Highest Level of Education Completed:

☐ HS Diploma
☐ GED
Year Received: _____
School Name: _____
City/State: _____

☐ Associate's
Year Received: _____
School Name: _____
City/State: _____

☐ Bachelor's
Year Received: _____ Major: _____
School Name: _____
City/State: _____

☐ Master's
Year Received: _____ Major: _____
School Name: _____
City/State: _____

☐ Doctorate
Year Received: _____ Major: _____
School Name: _____
City/State: _____

Please list any additional training and/or certifications:

_____

_____

LODGING & MEALS:

A limited number of dorm rooms are available at Samarcand Training Academy. Rooms are booked as single occupancy. Overnight guests are automatically provided access to the on-site cafeteria at no additional cost. The price inclusive of meals and lodging is $50/night. Weekend stays are permitted at no additional cost, however, meal service is not provided during weekends. Friday lunch is the last meal service until the following Monlease indicate below your intentions:

☐ Yes, I want dorm & cafeteria services at the academy for $50/night ($3500/10wk).

☐ No, I do not want dorm & cafeteria services. I will secure my own accommodations.

Students who are not staying on-site may utilize the on-site cafeteria on a pay-as-you-go basis.

The National Polygraph Academy will be your point of contact on all school related matters. Please DO NOT contact Samarcand with inquiries about their facilities, space availability in the course, etc. Please direct all questions to NPA. Thank you!

ADDITIONAL SUBMISSIONS:

- ☐ Current resume documenting at a minimum your employment history for the past 10 years.
- ☐ Copy of current driver's license.
- ☐ Copy of diploma or degree showing the highest level of education completed.
- ☐ **For non-sworn applicants only -** Two (2) letters of recommendation from two business or professional persons who have known you well during the past five (5) years. *(Letters of recommendation can be mailed directly to NPA by individuals making a recommendation. Applications for enrollment will not be considered until both letters are received.)*

APPLICATION AGREEMENT

If accepted for enrollment, by signing below, the applicant's sponsoring agency agrees to pay the National Polygraph Academy the total stated tuition of $6250.00 no later than 1 month prior to the start date of the course. The Academy agrees to provide the training in accordance with the provisions of the Academy Catalog. This application agreement includes the refund policy in the Academy catalog and may be amended only by both parties. Upon satisfactory completion of all academic and skill requirements, and when all financial obligations to the Academy have been met, the Academy will award a diploma reflecting the student's graduation from the training program.

Successful completion of an American Polygraph Association (APA) accredited polygraph-training program is only one of the necessary prerequisites for admission into the various national and state professional polygraph associations and/or the granting of a license to practice polygraph in the jurisdiction that requires such.

_____ _____/_____/_____

Agency / Law Enforcement Executive Signature ***Date***

I have received a copy of this application agreement and a current school catalog. I attest that I have read the admissions policy for the National Polygraph Academy and that I meet all the necessary requirements. I also attest that all information contained herein is true, correct and complete. I have not withheld, falsified, or misrepresented any information requested. Furthermore, I hereby grant permission to NPA and its staff to conduct a background, criminal records check for the purposes of admittance into this program.

_____ _____/_____/_____

Applicant Signature ***Date***

If you have any questions about the Academy or this application, please feel free to contact our office. Please submit this application, along with all appropriate attachments by the deadline listed on the front page. Slots for this course are filled on a first come, first serve basis.

All applications, along with the required supplemental attachments should be EMAILED to: shaw.national@gmail.com.

CONTACT INFORMATION:

Pam Shaw
Director
(859) 494-7429
shaw.national@gmail.com