

# PO Prior Service Accessions (PSA) Background Screening Questionnaire

**PRIVACY ACT STATEMENT:** The Privacy Act of 1974 requires that each individual asked to provide information be advised of the following:

- a. **AUTHORITY:** DoD 6025.18-R and 5 USC 301
- b. **PURPOSE:** This information is being requested to assist USAJFKSWCS officials in determining your suitability for an active duty Psychological Operations billet, as described in the PSA program.
- c. **ROUTINE USES:** This information will be provided to, and maintained by, USAJFKSWCS. It may be furnished to accredited DoD agencies, federal agencies, and law enforcement agencies for their official use.
- d. **VOLUNTARY DISCLOSURE:** The disclosure of personal information to USAJFKSWCS is voluntary. However, if you do not desire to supply the requested information, USAJFKSWCS may be unable to conduct a complete assessment and subsequently may be unable to determine your suitability for active duty as outlined by the PSA policy.

**INSTRUCTIONS:** In the space before each question, respond with a "yes" or "no" answer. For each "yes" response, provide the date(s) and a brief description of the circumstances. Initial and sign in the appropriate places indicating you verify your responses as truthful and accurate to the best of your knowledge.

Name (Last, First) and rank: \_\_\_\_\_

Have you ever...

- \_\_\_\_\_ 1. Been detained, arrested, or charged with a crime (even if found innocent)?  
Date(s): \_\_\_\_\_  
Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- \_\_\_\_\_ 2. Been arrested and/or charged with domestic violence (even if found innocent)?  
Date(s): \_\_\_\_\_  
Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- \_\_\_\_\_ 3. Been arrested and/or charged with a DUI/DWI (even if found innocent)?  
Date(s): \_\_\_\_\_  
Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- \_\_\_\_\_ 4. Been seen by a psychologist, psychiatrist, social worker, chaplain, life coach, family advocacy counselor, or any other mental health professional/counselor for behavioral health issues?  
Date(s): \_\_\_\_\_  
Description: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## PO Prior Service Accessions (PSA) Background Screening Questionnaire

\_\_\_\_ 5. Been evaluated, treated, arrested, or charged for problems related to alcohol, drugs, or a controlled substance?

Date(s): \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_ 6. Received a letter of reprimand, article 15, negative page 11, captain's mast, General's Letter of Reprimand (GOMAR), or court martial?

Date(s): \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_ 7. Been denied or had a security clearance revoked?

Date(s): \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_ 8. Failed to pay child support or alimony?

Date(s): \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_ 9. Been arrested and/or charged with child abuse/endangerment (even if found innocent)?

Date(s): \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_ 10. Experienced financial difficulties, to include bankruptcy, letter of indebtedness, or repossession of property?

Date(s): \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_ 11. Had unfavorable credit information by credit bureaus, businesses, or courts?

Date(s): \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

## PO Prior Service Accessions (PSA) Background Screening Questionnaire

\_\_\_\_\_ 12. Had an incident in your life which could be used to blackmail you? (Examples: adultery, infidelity, questionable associations, undetected theft, fraud, or embezzlement)

Date(s): \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ 13. Had an incident, which if it were to become public, could embarrass you, your family, or the United States?

Date(s): \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ 14. Have you been notified of a pending mobilization (individual or unit) or PCS orders?

Date(s): \_\_\_\_\_

Description: \_\_\_\_\_

\_\_\_\_\_

By signing below, I acknowledge that the answers listed on this document were given voluntarily, and are truthful and accurate to the best of my ability. I further acknowledge that this document constitutes an official document and if my answers are found to be untruthful, UCMJ action may be initiated.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
SSN

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Today's Date