

# Personal Data Sheet (Duplicate as needed)

To be completed for each owner, partner or shareholder and key management personnel.

Name: \_\_\_\_\_ S.S.# \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Residence Telephone: ( ) \_\_\_\_\_ Business Telephone: ( ) \_\_\_\_\_

Residence Address: \_\_\_\_\_ from: \_\_\_\_\_ to: Present

Previous Address: \_\_\_\_\_ from: \_\_\_\_\_ to: \_\_\_\_\_

1. Are you employed by the U.S. Government? Yes \_\_\_ No \_\_\_
2. Are you a U.S. Citizen? Yes \_\_\_ No \_\_\_
3. Are you presently subject to an indictment, criminal information, arraignment or other means by which formal criminal charges are brought in any jurisdiction? Yes \_\_\_ No \_\_\_
4. Have you been arrested in the past six months for any criminal offense? Yes \_\_\_ No \_\_\_
5. For any criminal offense – other than a minor motor violation, have you ever; been convicted, plead guilty, plead nolo contendere, been placed on pretrial diversion or been placed on any form of parole or probation (including probation before judgment)? Yes \_\_\_ No \_\_\_
6. Have you ever been involved in bankruptcy or insolvency proceedings? Yes \_\_\_ No \_\_\_
7. Are you or your business involved in any pending lawsuits? Yes \_\_\_ No \_\_\_
8. Has your business received any previous government financing? Yes \_\_\_ No \_\_\_

## Military Service Background

Branch of Service: \_\_\_\_\_ Dates of Service: \_\_\_\_\_

## Ethnicity:

\_\_\_ American Indian/Alaska Native    \_\_\_ Asian    \_\_\_ Black/African American  
\_\_\_ Pacific Islander    \_\_\_ White/Caucasian    \_\_\_ Other: \_\_\_\_\_

## Business Information:

How many jobs are currently at the business? \_\_\_\_\_ How many jobs will be created by the project? \_\_\_\_\_

## Work Experience (List chronologically, beginning with present employment.)

1. Company Name/Location: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Title: \_\_\_\_\_  
Duties: \_\_\_\_\_
2. Company Name/Location: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Title: \_\_\_\_\_  
Duties: \_\_\_\_\_
3. Company Name/Location: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Title: \_\_\_\_\_  
Duties: \_\_\_\_\_

## Education

College/Technical Training – Name/Location    Dates Attended    Major    Degree/Certificate

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_