



**NORTH CAROLINA  
PRIVATE PROTECTIVE SERVICES BOARD**

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**PERSONAL REFERENCE QUESTIONNAIRE**

**TO APPLICANT:** *Print your name, the date and phone number below and have each of your character references complete the personal reference questionnaire. This form will be uploaded during your application process. Keep the original with your application confirmation page as it may be requested for review by your assigned investigator.*

Name: \_\_\_\_\_ Date: \_\_\_\_\_ License Type: \_\_\_\_\_ Ph: \_\_\_\_\_

**\*\*\*YOUR APPLICATION WILL NOT BE PRESENTED TO THE BOARD UNTIL ALL REFERENCES HAVE BEEN RECEIVED\*\*\***

**REFERENCE:** This questionnaire is to be completed by the reference only, signature notarized and returned to Applicant.

How long have you known the applicant? \_\_\_\_\_

Do you know him/her personally or professionally? \_\_\_\_\_

Have you ever known the applicant to have alcohol or drug problems? \_\_\_\_\_

What kind of person do you think he/she is and how would you summarize his/her moral character? \_\_\_\_\_

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

Have you ever observed or had knowledge of the applicant doing anything you felt was illegal or questionable?

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

Is there anything else about the applicant that has not been asked that you feel we need to know about him/her before we grant the applicant a license? \_\_\_\_\_

\_\_\_\_\_

Would you recommend the applicant for the license that he/she has requested? \_\_\_\_\_

Reference Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

Address: City/State/Zip \_\_\_\_\_

Telephone: \_\_\_\_\_

**THE ABOVE WAS SWORN AND SUBSCRIBED BEFORE ME THIS**

The \_\_\_\_\_ Day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public

My Commission Expires: \_\_\_\_\_

**(SEAL)**