



# 308<sup>th</sup> RQS

## Pararescue Applicant Background Information



Name: \_\_\_\_\_ SSAN: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City, State, Zip Code)

Age: \_\_\_\_\_ DOB: \_\_\_\_\_ US Citizen: Yes \_\_\_\_\_ No \_\_\_\_\_

Place of Birth: \_\_\_\_\_  
(City or Country) (County) (State)

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

High School Diploma or GED: \_\_\_\_\_

Name and location of HS: \_\_\_\_\_ Date Graduated: \_\_\_\_\_

Name & Location of College: \_\_\_\_\_ Graduate: Yes \_\_\_\_\_ No \_\_\_\_\_

Semester Hours: \_\_\_\_\_ Quarter Hours: \_\_\_\_\_

Present Occupation: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Valid Driver's License: Yes \_\_\_\_\_ No \_\_\_\_\_ DL#: \_\_\_\_\_ State: \_\_\_\_\_ Exp: \_\_\_\_\_

Married Status: Married \_\_\_\_\_ Single \_\_\_\_\_ Divorced \_\_\_\_\_ Legally Separated \_\_\_\_\_

Dependents: Yes No Number of Minor Dependents: \_\_\_\_\_

Have You Been a Member of the Military Before? Yes \_\_\_\_\_ No \_\_\_\_\_

Branch: \_\_\_\_\_ Rank: \_\_\_\_\_ AFSC/MOS: \_\_\_\_\_ DOS: \_\_\_\_\_



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Have you ever used, possessed, sold, or transported any illegal drugs to include experimental use of Marijuana? Yes \_\_\_\_\_ No \_\_\_\_\_

Drug: \_\_\_\_\_ Date last used: \_\_\_\_\_ How many times: \_\_\_\_\_

Have you ever been charged, arrested, sited, held, or questioned by any law enforcement agency to include minor traffic, juvenile, or crime of domestic violence regardless of disposition? Yes \_\_\_\_\_ No \_\_\_\_\_ If Yes, Explain:

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Have you ever had any surgeries, allergies, or medical issues? Are you currently on any medications or currently or previously counseled by a mental health professional? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, Explain:

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Do you have any tattoos? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, Explain:

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How did you find out about the 308<sup>th</sup> Rescue Squadron?

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Why are you interested in joining the Pararescue program?

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