

VIRGINIA SCHOOL OF POLYGRAPH

7885 Coppermine Rd.
Manassas, VA 20109

Telephone: (703) 396-7659
www.virginiaschoolofpolygraph.com

ENTRANCE REQUIREMENTS FOR VIRGINIA RESIDENTS

- A. All applicants must have a high school diploma or its equivalent, and a minimum of 5 years experience as an investigator, detective or experience in a behavioral science related field acceptable to the Department.
- B. Two years of experience shall be waived by applicants with an associate degree from an accredited college or university.
- C. All five years of experience shall be waived for applicants with a bachelor's degree from an accredited college or university.
- D. The student must send with their application their high school diploma and college transcripts. The student must also supply 3 letters of reference from a knowledgeable individual of their experience indicating the number of years of investigative experience the student has, which is required if the student does not have a bachelor's degree.

FOR NON-VIRGINIA RESIDENTS

- A. You will be accepted if you meet the licensing requirements of your state. Check with your State Licensing Agency.

GENERAL INFORMATION

The Virginia School of Polygraph provides 400 hours of professional, individualized instruction, which is designed to prepare the student to conduct any type of polygraph examination. The entire course, including specialized areas of instruction (physiology, psychology, legal aspects, chart interpretation, mechanics and instrumentation), is taught by highly trained and expert polygraph examiners with over 80 years of experience.

TUITION**

The full tuition is \$6,000 for courses held in Manassas and \$6,300 for courses held in Newport News. This charge includes all handout material, notebook and needed supplies.

CLASS SCHEDULE

Classes meet Monday thru Friday, from 9:00 A.M. – 6:00 P.M.

GRADES

Weekly written and/or oral examinations are given. Students are required to maintain an overall grade point average of 80%.

HOTELS

We provide names and contact numbers of a number of hotels in the area of the school or training locations. VSP does not personally recommend any one hotel over another and making reservations are the student's responsibility. Please see the VSP main website for hotel information. Reservations can be made by phoning the motel directly.

APPLICATIONS

Applications can be obtained by writing directly to:

Darryl L. DeBow, Director

7885 Coppermine Dr.

Manassas, VA 20109

Phone: 703-396-7659

Each perspective student must submit an application form, three letters of reference verifying their experience and character, and a copy of an appropriate transcript – either high school or college.

All applicants must submit a non-refundable \$100 application fee that will be credited toward the tuition fee.

COURSE APPROVAL

This course is approved by the Virginia Department of professional and Occupational Regulation, American Polygraph Association, American Police Polygraph Association and Texas board of Polygraph Examiners.

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FOR EARLY REGISTRATION AND CLASS RESERVATIONS

NAME: _____

POSITION: _____

COMPANY/AGENCY: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE Business: () _____ Home: () _____

EMAIL: _____

_____ I would like to attend the Virginia School of Polygraph on these dates:

From _____ To _____

_____ Enclosed is my application fee of \$100.00, which will be applied toward my total tuition fee of \$6,000.00 or \$6,300.00 if in Hampton Roads area. I understand that this application fee will not be refunded if I am NOT accepted.

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AUTHORIZATION FOR THE RELEASE OF INFORMATION

To any police department, medical association, U.S. Armed Forces, maritime service, veterans administration, or any academic dean, registrar, principal, guidance counselor, or authorized person at a school, college, business school, trade school, high school, or institution, commercial bank, U.S. Post Office, U.S. Selective Service System, or neighbor:

I, _____

address, _____

have applied for enrollment in the Virginia School of Polygraph, Manassas, Virginia. I am aware that my entire background is to be investigated. I hereby authorize and request the release of any and all information you have concerning myself, including a transcript of any academic record to the Virginia School of Polygraph, registrar, or his representative upon presentation of this signed document.

Signature

Date

Signature

Date

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APPLICATION FOR ENROLLMENT

Please type or print in ink

NAME: _____ AGE: _____ SEX: _____

 Last First Middle

ADDRESS: _____

 Street City State Zip

PHONE Home: () _____ Business: () _____ U.S. Citizen? (Circle one) YES or NO

DATE OF BIRTH: _____ PLACE OF BIRTH: _____

MARITAL STATUS: _____ NUMBER OF CHILDREN: _____ SSN: _____

MILITARY SERVICE: _____

 Branch Type of Discharge Rank at Discharge

EMAIL: _____

ARREST RECORD

Other than minor traffic

Date	Location	Charge	Disposition
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EDUCATION

High School:

Name & Location of School	From	To
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College(s):

Name & Location of School	From	To	Degrees – Major
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Specialized Training:

Name & Location of School	From	To	Degrees – Major
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Note: Attach copy of high school diploma or college transcripts to substantiate educational level.

EMPLOYERS

List all employers back to high school, starting with present employer

Month/Year	Name & Address of Employer	Position	Reason for Leaving
From			
To			
From			
To			
From			
To			
From			
To			

REFERENCES

List the names of three persons not related to you.

	Name	Address	Phone	Business	Years Acquainted
1.					
2.					
3.					

Note: Enclose letters of recommendations, which specify length of investigative experience, if any.

SPONSOR

Are you going to be sponsored by a law enforcement agency? (Circle one) YES or NO

No person will be considered for enrollment who has been convicted of any felony or any crime involving moral turpitude, or any person who has been discharged from any branch of the military service, federal, city, or state government, under any but honorable conditions. Any person may be denied admittance for excessive arrests.

Any material misstatement of fact in this application will result in immediate dismissal and forfeiture of admission fees.

I realize any falsification of information on this application is grounds for immediate dismissal from the program.

Signature of Applicant