

Controlled / Restricted Substance Questionnaire

Name _____

Job Title _____

Date of Hire _____ Date of Birth _____

Driver's License: State of Issue _____ Number _____

Social Security Number _____ Home Phone Number _____

Home Address _____ (Number / Street)
_____ (City/Zip Code)

Within the last five years, have you been convicted of a felony?* No Yes

Within the last five years, have you been convicted of a misdemeanor?* No Yes

Are you at this time, formally charged with committing a criminal offense?* No Yes

If you answered yes to any of the questions above, provide exact details of the convictions, offenses, where committed, sentencing court, date of sentence and nature of sentence:

In the last three years, have you knowingly used any narcotics, amphetamines or barbiturates that were not prescribed by a licensed physician? No Yes

If yes, provide complete and exact details:

PRIVACY ACT INFORMATION

DEA - 224 Application for Registration (Type A)
DEA - 225 Application for Registration (Type B)
DEA - 363 Application for Registration (Narcotic Treatment)

AUTHORITY: Section 302 and 303 of the Controlled Substances Act of 1970 (PL 91-513)

PURPOSE: To obtain information required to register applicants pursuant to the Controlled Substances Act of 1970 (PL 91-513)

ROUTINE USES: The Controlled Substances Act Registration Records produce special reports as required for statistical analytical purposes. Disclosures of information from this system are made to the following categories of users for the purposes stated:

- A: Other Federal law enforcement and regulatory agencies for law enforcement and regulatory purposes.
- B: State and local law enforcement and regulatory agencies for law enforcement and regulatory purposes.
- C: Persons register under the Controlled Substances Act (Public Law 91-513) for the purpose of verifying the registration of customers and practitioners.

By signing, I attest that I have given complete and accurate information. I authorize The Scripps Research Institute or its authorized agents to conduct a background check for the purposes stated and in accordance with all applicable state and federal laws.

Signature _____ Date _____

*Do not include any traffic violations, juvenile offenses, or military convictions, except by general court martial.