

GUYANA DEFENCE FORCERECRUITMENT INITIAL INTERVIEW FORMPERSONAL INFORMATION

1. SURNAME:.....
2. FIRST NAME:.....
3. OTHER NAMES:.....
4. DATE OF BIRTH:.....SEX: M ☐ F ☐ HEIGHT:.....
5. ADDRESS:.....
.....
6. HAVE YOU EVER BEEN ARRESTED OR INVOLVED IN ANY MATTER
WITH THE POLICE? YES ☐ NO ☐
7. HAVE YOU EVER USED/ SMOKED MARIJUANA OR ANY OTHER
ILLCIT DRUGS?
YES ☐ NO ☐
8. IF YES, have you smoked within the
Last month ☐ Last 2 months ☐ Last 3 months ☐
9. DO YOU HAVE ANY TATOO(S)? YES ☐ NO ☐
IF YES; WHERE?
10. HAVE YOU HAD A TATTOO OR BODY PIERCING DONE WITHIN
THE LAST THREE (3) MONTHS? YES ☐ NO ☐
11. HAVE YOU BEEN VACCINATED FOR HEPATITIS B WITHIN THE
LAST THREE (3) MONTHS? YES ☐ NO ☐
12. HAVE YOU EVER DONE A DENTAL CHECK? YES ☐ NO ☐
13. DO YOU HAVE ANY CAVITY? YES ☐ NO ☐
14. DO YOU HAVE ANY MEDICAL CONDITION? YES ☐ NO ☐
IF YES; STATE.....
15. DO YOU HAVE ANY PHYSICAL LIMITATIONS? YES ☐ NO ☐
IF YES; STATE.....
16. HAVE YOU HAD SURGERY? YES ☐ NO ☐
IF YES; STATE.....
17. DO YOU HAVE ANY BROKEN BONE(S)/FRACTURE(S)? YES ☐ NO ☐
IF YES; WHERE?

RESTRICTED

18. RECOMMENDED: YES ☐ NO ☐

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POTENTIAL RECRUIT

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INTERVIEWING STAFF

REFERRED:

19. APPROVED: YES ☐ NO ☐

.....
OFFICER COMMANDING

DATE: 20 - -

RESTRICTED