-						-			
POLYGRAPH EXAMINATION AUTHORIZATION						DATE OF REQUEST			
For use of this form, see AR 195-6; proponent agency is US Army Criminal Investig						REPOSITORY / DOSSIER NO			
TO: (Authorizing Representative) FROM					1: (Requesting Age	ency)			
1. Request authority to conduct polygraph examination of:									
EXAMINEE NAME (Last, First, Middle) OR SOURCE NUMBER					GRADE SOCIAL SECURITY NO				
UNIT, ADDRESS, OR DOD AFFILIATION					DATE AND PLACE OF BIRTH				
2. The	e follov	ving information is pro	ovided:						
a.	(U)	reasonably permit a	cumstances of the case, inv and the development of add	itional i	nformation by mea				
b. c.	(U) (U)	For criminal investigation polygraph examinations; The offense which forms the basis for the investigation is punishable under the Uniform Code of Military Justice by death or by confinement for a term of one year or more and there is reasonable cause to believe that the proposed examinee has knowledge of or was involved in the matter under investigation.							
d.	(U)								
e. f.	() ()	operative in an app Basis for investigati Summarized justific	ion (MI: Purpose):	erintellig	ence operation.				
g.	(U)	Initial request for au Request confirms tel	thorization. Iephonic request made on			<u></u> .			
TYPED NAME	E, GRA	DE, POSITION OF RE	QUESTER	SIGN	ATURE OF REQUI	ESTER			
SPECIAL HANDLING INSTRUCTIONS AND NOTICES DOW					NGRADING/REGRADING/TERMINATION MARKING				
DA FORM 2805, OCT 76 PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE USAPPC V2.00									

TO: (Requesting Agency)	DATE							
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CONDUCT OF POLYGRAPH EXAMINATION IS AUTHORIZED.	CONDUCT OF POLYGRAPH EXAMINATION IS AUTHORIZED.							
THIS CONFIRMS TELEPHONIC AUTHORIZATION GRANTED ON	THIS CONFIRMS TELEPHONIC AUTHORIZATION GRANTED ON							
CONDUCT OF THE POLYGRAPH EXAMINATION IS NOT AUTHORIZED	CONDUCT OF THE POLYGRAPH EXAMINATION IS NOT AUTHORIZED.							
PRIOR TO AUTHORIZATION, FURNISH THE FOLLOWING:	PRIOR TO AUTHORIZATION, FURNISH THE FOLLOWING:							
REMARKS								
TYPED NAME, GRADE, POSITION OF AUTHORIZING REPRESENTATIVE	SIGNATURE OF AUTHORIZING	REPRESENTATIVE						

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