



Personal History Form Reference Information

- 1. This PHF is in connection with one of the following ARC applications:
- New Accredited Agency Application
- Ownership Change Forms
- Change of Location
- New Branch Location Forms
- Database Integrity Change Form
- Other:
2. Agency Code Number (ACN)/Pending Number to which this PHF is connected (if applicable):
3. Legal name of Agency/Applicant:
4. City: State: Zip Code:

Part 1 - Basic Information

- 1. Full legal name: First: Middle: Last:
2. Full Maiden name or Full Birth Name: First: Middle Last
3. All other names used: First: Middle Last
4. Social Security Number:
5. Driver's License/State Identification Number: State:
6. Date of birth:
7. Place of birth: City: State: Country:
8. Are you a citizen or national of the U.S. or Resident Alien authorized to live and work in the U.S.?
If Resident Alien status applies, provide the following:
a. What is your Registered Alien number?
b. Enter the expiration date of the Alien Registration:
c. Of what Country are you a citizen of:

Part 2 - Qualifier Roles

A. Management Qualifier

- 1. Are you the designated management qualifier for the Agency/Applicant?
a. Have you had at least 2 years full-time experience in selling general travel services to the public?
b. Have you had at least 2 years full-time experience in supervising the operation of a business offering general travel services to the public?

B. ARC Specialist Qualifier (ASQ)

- 1. Are you the designated ARC Specialist Qualifier (ASQ) for the Agency/Applicant?
a. Within the past four years, have you successfully completed ARC Specialist Examination?
i. If 'Yes' indicate the Certificate Number and Expiration Date.
ii. If 'No', indicate the date when you plan to take the ARC Certified Specialist Examination.

C. Designated Manager

Are you the designated manger for the HOL and/or Branch?
Please list the ACN's below for which you will be the Designated Manager. If there are more than 25 locations, please list them on a separate sheet with the same heading.

1 2 3 4 5
6 7 8 9 10



11 _____ 12 _____ 13 _____ 14 _____ 15 _____
 16 _____ 17 _____ 18 _____ 19 _____ 20 _____
 21 _____ 22 _____ 23 _____ 24 _____ 25 _____

D. Ticketing Qualifier

- 1. Are you the designated ticketing qualifier for the Agency/Applicant? Yes No
 - a. Within the past three years, have you had at least one-year's full-time experience in airline ticketing?
 Yes No

Part 3 - Roles and Responsibilities

A. I currently have or upon approval of the application will have access to the following:

- ARC traffic documents
- Monies or credit card documents collected for the agency
- ARC traffic documents located in the agency's off-premises storage facility
- The agency location when closed, locked or unattended by agency personnel

B. I currently have or will have authority for the following

- To make deposits into the ARC-designated bank account
- To make withdrawals from the ARC-designated bank account
- To prepare and submit ARC sales reports

C. Is the Agency/Applicant a corporation or a limited liability company? Yes No

1. As the Applicant, state all positions that you hold in the company:

- a) Title 1: _____
- b) Title 2: _____
- c) Title 3: _____

- 2. If the Agency/Applicant is a LLC, are you the managing member? Yes No
- 3. If the Agency/Applicant is a partnership, are you the managing partner? Yes No
- 4. If the Agency/Applicant is a corporation, please state the percentage of shares that you own: _____%

Part 4 - Residence History

List all places where you have lived during the past three years, beginning with your current address. ARC may require you to provide residence history for a period exceeding three years. If you need to provide additional residence history information, complete the Residence History Continuation Page.

A. Current address: From: _____ To: Present

- 1. Street address: _____ Apartment number: _____
- 2. City: _____ State: _____ Zip Code: _____
- 3. Country: _____
- 4. Telephone Number: _____

B. Former residence: From: _____ To: _____

- 1. Street address: _____ Apartment number: _____
- 2. City: _____ State: _____ Zip Code: _____
- 3. Country: _____



Personal History Form

C. Former residence: From: _____ To: _____

1. Street address: _____ Apartment number: _____
2. City: _____ State: _____ Zip Code: _____
3. Country: _____

Part 5 - Employment History

Provide the required information for all of your occupations, employment, and work activities, as well as period of unemployment, self-employment, etc., during the last three years, beginning with your current employer, occupation or activity (including your employment by or affiliation with the Agent or applicant, if applicable). If you need additional space to account for your full three year employment history, complete and submit the Employment History Continuation Page, ARC may require you to provide employment history for a period exceeding three years.

A. Current Employment

Date of business/activity: From: _____ To: Present

Name of Business/Activity: _____

Suite/Floor/P.O. box _____

Street address: _____

City: _____ State: _____ Country: _____ Zip Code: _____

Telephone number: _____

Agency Code Number (if applicable): _____ Title or position: _____

Manager: First: _____ Last: _____

B. Former Employment

Date of business/activity: From: _____ To: _____

Name of Business/Activity: _____

Suite/Floor/P.O. box: _____

Street address: _____

City: _____ State: _____ Country: _____ Zip Code: _____

Telephone number _____

Agency code number (ACN) (if applicable): _____ Title or position: _____

Manager: First: _____ Last: _____

C. Former Employment

Date of Business/Activity: From: _____ To: _____

Name of Business/Activity: _____

Suite/Floor/P.O. box: _____

Street address: _____

City: _____ State: _____ Country: _____ Zip Code: _____

Telephone number: _____

Agency code number (ACN) (if applicable): _____ Title or position: _____

Manager: First: _____ Last: _____



Part 6 - Background of Agency/Applicant Personnel

If you answer "Yes" to any question in Part 6 A-H, complete the Personal History Form Continuation Page.

A. Prior Affiliation with any Accredited Agency or Entity

1. Have you ever had a financial interest in, or a connection or affiliation with, or been employed by, any agent/entity accredited by ARC, ARP, ATC, IATA, or IATAN (other than the agencies/entities which you have already identified in other parts of this Personal History Form)? Yes No

B. Prior Affiliation with a Non-Accredited Agency or Travel Company

1. Have you ever had a financial interest in, or a connection or affiliation with, or been employed by any non-accredited travel agency or a business offering general travel services (other than the agencies or businesses which you have already identified in other parts of this Personal History Form)? Yes No

C. Prior Affiliation by a Family Member

1. Does any member of your family currently have, or has any member of your family ever had, a financial interest in, an affiliation or connection with, or been employed by an agent accredited by ARC, ATC, ARP, IATA OR IATAN? Yes No
Note: Family members include but are not limited to, your spouse, siblings, children, parents, and in-laws.

D. Affiliation with a Cancelled Agent

1. Have you ever had a financial interest in, or a connection or affiliation with, or been employed by any agent canceled by ARC, ARP, ATC, IATA, or IATAN Agency List? Yes No

E. Affiliation with Agent Presently in Default

1. Have you ever had, or do you currently have, a financial interest in, or a connection or affiliation with, or are/were you employed by, an agent/entity presently in default under the provisions of the ARC Agent Reporting Agreement or any other ARC Reporting Agreement or the Travel Agent Service Fee Program Agreement (TASFPA)? Yes No

F. Felonies or Misdemeanors

- 1. Have you ever been convicted of a felony or pled guilty or nolo contendere (no contest) to a felony? Yes No
- 2. Have you ever been convicted of a misdemeanor related to financial activity or pled guilty or nolo contendere (no contest) to a misdemeanor related to financial activities? Yes No
- 3. Have you ever been found by a court to have committed a breach of fiduciary duty involving the use of funds of others? Yes No
- 4. Have you ever been arrested, or currently under investigation by federal, state, or local law enforcement authorities (e.g., police, attorney general's office, consumer protection agencies, etc.) for any offense or crime, or any alleged offense or crime in any way related to employment or affiliation with a travel agency or travel related company? Yes No

G. Involvement with Stolen, Missing or Counterfeit Traffic Documents

1. Have you ever been involved in the distribution, sale or issuance of BSP, ATC, IATA, ARP or ARC traffic documents which you knew, or reasonably should have known, were stolen, counterfeited or reported as missing from an agent? Yes No

H. Bankruptcy

- 1. Are you presently, or have you ever been, an owner, officer, director, or management employee of any business that has ever filed or been the subject of, a petition in bankruptcy? Yes No
- 2. Have you ever filed, or been the subject of, a petition in bankruptcy? Yes No
- 3. Have you ever been the subject of an adversary proceeding in any bankruptcy case? Yes No

Personal History Form Checklist

- A copy of your valid driver's license/state identification card (front and back).
- Copies of all documents that prove your U.S. citizenship (U.S. Passport, birth certificate or Naturalization Certificate for U.S. citizens), or for non-U.S. citizens your authorization to work and reside in the U.S., including your Alien Registration Card ("Green Card") and all other documents and visas issued to you by the U.S. Immigration and Naturalization Service.
- Personal History Form Continuation Page (if applicable)



Personal History Form

- Residence History Continuation Page (if applicable)
- Employment History Continuation Page (if applicable)

Part 7 - Certification

I hereby certify that the statements made in this application and the attachments thereto are true and correct. I have read the instructions for completing this Personal History Form (PHF), and certify that the information in the PHF was completed by me, or under my direction; and, that prior to signing the PHF, I have reviewed each question and answer, and, if submitted electronically, the electronic and the original PHF contain identical information. I acknowledge and understand that, as part of the evaluation and verification process, ARC may need to verify the information contained in the PHF. I authorize ARC to conduct such investigation as it deems appropriate to verify the accuracy of the information in this PHF, and I authorize release to ARC of any documents, such as but not limited to, personal identification documents, lease agreements, credit reports, employment agreements, photographs, fingerprints, and IRS documents, as may be required.

I hereby waive all rights based on libel, slander, or defamation of character by reason of ARC's publication, of any reason for disapproval of this application, including information contained in this PHF, provided that such reason is reasonably related to the discharge of ARC's obligations, the exercise of its rights, or the performance of its officers, directors, and/or employees in evaluating and approving or disapproving this application.

If there are any changes to any of the answers or information provided in this Personal History Form, I will notify ARC, in writing, immediately.

Date: _____

Signature _____

Name: _____
Printed Name of above signatory

Title: _____
Title of above signatory

(FOR NOTARY USE ONLY)

County of: _____

State of: _____

On this _____ day of _____, 20____.

(Print Name of above signatory)

appeared before me and, having been duly sworn by me, stated that the contents of the foregoing application are true and complete, and signed the application in my presence.

NOTARY SEAL

(Notary Public Signature)

My commission expires on _____