



Instructions: If you answered "Yes" to any question in Part 6.A-H of the Personal History Form (PHF) or to any of the questions Section 13 A-E on the Location Transfer Form, please provide the required additional information in the corresponding question below:

Provide the ARC Number or the "pending number" assigned to the application (if known): _____

Provide the full legal name of Agent/Applicant: _____
(Unless otherwise stated in this Form the terms Agency/ Applicant also includes CTDs and VTCs)

Provide the full legal name of the person to which the following responses apply: _____

A. Affiliation with Any Accredited Agency or ARC Approved Entity

Provide the following information if you have or have had an affiliation or connection with any accredited ARC, ATC, ARP or IATA agency or ARC Approved entity other than the agencies or entities previously identified in your Personal History Form. If additional space is needed, please attach information on a separate sheet of paper using the same headings below (1-4).

1. ARC Number: _____
2. Legal Name of Agent with which you are/were affiliated: _____
3. City: _____ State: _____
4. Dates of your affiliation: From: _____ To: _____

B. Affiliation with Non-Accredited Agency or Travel Company

Provide the following information if you have, or have had an affiliation with any non-accredited agency, or travel related entity, other than those that you have already identified in your Personal History Form. If additional space is needed, please attach information on a separate sheet of paper using the same headings below (1-6).

1. Name of the non-accredited agency or travel business with which you are/were affiliated: _____
2. Street address: _____
3. Suite, Floor, or P.O. Box: _____
4. City: _____ State: _____ Telephone No.: _____
5. Dates of your affiliation with the agent/business: From: _____ To: _____
6. Your role at the Agency/Business: _____

C. Affiliation by a Family Member

Provide the following information if any member of your family currently has, or has 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.

[Note: Family members include but are not limited to, your spouse, siblings, children, parents, and in-laws.]

1. Family Member First Name: _____ MI: _____ Last: _____
2. Relationship of the person identified in C.1 to you: _____
3. Name of the Agency your family member was affiliated with: _____
4. Street address: _____
5. Suite, Floor, or P.O. Box: _____
6. City: _____ State: _____ Telephone No.: _____
7. Dates of your family member's affiliation with the agent/business: From: _____ To: _____
8. Family member's role at the Agency/Business: _____



D. Affiliation with a Canceled Agent

Provide the following information if you have, or ever had a financial interest in, or a connection or affiliation with, or been employed by, any agency whose Agreement was terminated and/or canceled from the ARC, ATC, or ARP Agency List. If additional space is needed, please attach information on a separate sheet of paper using the same headings below (1-8).

1. Canceled Agent's Legal Name: _____
2. City, State _____
3. ARC Number: _____
4. Dates of your affiliation: From: _____ To: _____
5. List the positions and roles which you held (or hold) in the agency identified above: _____
6. Do you make withdrawals, or did you have authority to make withdrawals, from the ARC designated bank account?
 Yes No
7. Did you have access to ARC traffic documents? Yes No
8. Did you prepare or submit ARC sales reports? Yes No
9. Did you have access to monies or credit card documents collected from the sale of tickets or other services issued on ARC traffic documents? Yes No

Please include a statement describing the circumstances of your affiliation with the canceled agent(s) and explain why you and the Agent (or Applicant) can be relied on to comply with the terms of the Agent Reporting Agreement.

E. Affiliation with an Agent Presently In Default

Provide the following information if you have a financial interest in, or a connection or affiliation with, or are employed by an agent presently in default under the provisions of the ARC Agent Reporting Agreement. If additional space is needed, please attach information on a separate sheet of paper using the same headings below (1-8).

1. Legal name of Agent In Default: _____
2. City and State where Agent is located: _____
3. ARC Number: _____
4. Dates of your affiliation: From: _____ To: _____
5. List the positions which you held or hold in the agency identified above: _____
6. Please include a statement describing the circumstances of your affiliation with the defaulted agent and explain why you and the Agent (or Applicant) can be relied on to comply with the terms of the Agent Reporting Agreement.

F. Felonies and Misdemeanors

If you have ever:

- (a) Been convicted of any felony
- (b) Pled guilty or no contest to any felony
- (c) Been convicted of misdemeanor related to financial activities
- (d) Been convicted of a misdemeanor related to computer fraud
- (e) Been found by a court to have committed a breach of fiduciary duty involving the funds of others

Please describe the circumstances of the offense and include

- the name of the court or jurisdiction
- the docket number
- dates of the conviction or court determination and
- A statement explaining why you and the Agent (or Applicant) can be relied on to comply with the terms of the Agent Reporting Agreement.

G. Involvement with Stolen, Missing or Counterfeit Traffic Documents

If you have ever been involved in the distribution, sale or issuance of ARC Traffic Documents which you knew, or reasonably should have known, were stolen, counterfeited or reported as missing from an agent, please include a statement describing your involvement and explain why you and the Agent (or Applicant) can be relied on to comply with the terms of the Agent Reporting Agreement.

H. Bankruptcy

1. If you have ever filed, or been the subject of a petition in bankrupt, please provide the following information:

- a. Name and location of the court where the bankruptcy was filed
- b. Chapter of the bankruptcy code under which the petition was filed: Chapter 7 Chapter 11 Chapter 13
If other, describe: _____
- c. Bankruptcy case number or docket number: _____
- d. Date when the bankruptcy was filed:
- e. Is the bankruptcy case closed? Yes No If closed, provide the date of closure: _____
- f. Was a discharge received from the court? Yes No
- g. What was the final disposition of the bankruptcy? _____
- h. Have you ever been the subject of an adversary proceeding in any bankruptcy case? Yes No

If "YES" please provide the name of the case, court where the case was filed and the case number:



2. If you have ever been an owner, officer, director, member or management employee of any business which has ever filed, or been the subject of, a petition in bankruptcy, provide the following information:
- a. Legal name of business (the Debtor): _____
 - b. Your position/title with the business: _____
 - c. Chapter of the bankruptcy code under which the petition was filed: Chapter 7 Chapter 11 Chapter 13
If other, describe: _____
 - d. Location of Bankruptcy Court: _____
 - e. Bankruptcy case number or docket number: _____
 - f. Date when the bankruptcy was filed: _____
 - g. Is the bankruptcy case closed? Yes No If closed, provide the date of closure: _____
 - h. Was a discharge received from the court? Yes No
 - i. What was the final disposition of the bankruptcy? _____

Please Note:

For purposes of this form, unless stated otherwise, the terms "Agent/Applicant" and "Agent Reporting Agreement" also mean "Corporate Travel Department or CTD" and "CTD Reporting Agreement" and "Verified Travel Consultant or VTC" and "VTC Program Agreement."