

FINGERPRINT APPOINTMENT

● **PRIOR TO YOUR APPOINTMENT – Complete the form**

1. Name:

- a. Last Name: _____
- b. First Name: _____
- c. Middle Name: _____
- d. Date of Birth: _____

2. Residence/Address:

- a. Street: _____
- b. City/State/ZIP: _____
- c. Place of Birth: _____
- d. Citizenship: _____

3. Physicals:

- a. Sex: _____
- b. Race: _____
- c. Height: _____
- d. Weight: _____
- e. Eyes: _____
- f. Hair: _____

USE THE FOLLOWING CODES IN THE DESCRIPTION FIELDS

EYE COLOR:

HAIR COLOR:

FBI RACE CODES:

BLK = BLACK	BLK= BLACK	W= CAUCASIAN/HISPANIC
BRO= BROWN	BLN= BLONDE	B= AFRICAN AMERICAN
BLU= BLUE	BRO= BROWN	A=ASIAN/PACIFIC ISLANDER
GRN= GREEN	GRY= GREY	I= NATIVE AMERICAN
GRY= GREY	RED= RED	U= UNKNOWN
HAZ= HAZEL	WHI= WHITE	* YOU MUST INDICATE A
	XXX= BALD	RACE CODE TO THE FBI FOR IDENTIFICATION PURPOSES

APPLICANT		LEAVE BLANK		TYPE OR PRINT ALL INFORMATION IN BLACK		FBI		LEAVE BLANK	
FD-258 (Rev. 9-9-13) 1110-0046		SIGNATURE OF PERSON FINGERPRINTED		LAST NAME	FIRST NAME	MIDDLE NAME	DATE OF BIRTH		
RESIDENCE OF PERSON FINGERPRINTED				ALIANES AKA			OR I		
DATE	SIGNATURE OF OFFICIAL TAKING FINGERPRINTS		CITIZENSHIP		CTZ	SEX	RACE	HGT.	WGT.
EMPLOYER AND ADDRESS		SEARCH FINGERPRINTED		YEAR NO.		DCA	PLACE OF BIRTH		
				FBI NO.		FBI	LEAVE BLANK		
				ARMED FORCES NO.		MNU	CLASS		
				SOCIAL SECURITY NO.		SOC	REP.		
				MISCELLANEOUS NO.		MNU			