

APPLICANT

LEAVE BLANK

TYPE OR PRINT ALL INFORMATION IN BLACK

FBI

LEAVE BLANK

LAST NAME NAM FIRST NAME MIDDLE NAME

SAMPLE JOHN QUINCY

SIGNATURE OF PERSON FINGERPRINTED

ALIASES AKA

OR I

Blank or if any data is in this field it will be ignored when processing card

DATE OF BIRTH DOB
Month Day Year
01 01 70

RESIDENCE OF PERSON FINGERPRINTED

111 North Main Street
Anywhere, WI 53554

CITIZENSHIP CTZ
country of citizenship

SEX M RACE W HGT 511 WGT 180 EYES BLU HAIR BRO PLACE OF BIRTH POB
state or country

DATE SIGNATURE OF OFFICIAL TAKING FINGERPRINTS

YOUR NO. OCA

LEAVE BLANK

EMPLOYER AND ADDRESS

McDonald's
Anywhere, WI

FBI NO. FBI

CLASS

ARMED FORCES NO. MNU

REASON FINGERPRINTED

Police Certificate

SOCIAL SECURITY NO. SOC
111-22-3333

REF.

MISCELLANEOUS NO. MNU

1. R. THUMB 2. R. INDEX 3. R. MIDDLE 4. R. RING 5. R. LITTLE

SAMPLE

6. L. THUMB 7. L. INDEX 8. L. MIDDLE 9. L. RING 10. L. LITTLE

LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY

L. THUMB

R. THUMB

RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY