

APPLICANT		LEAVE BLANK		TYPE OF PRINT: ALL INFORMATION IN BLACK			FBI		LEAVE BLANK		
SIGNATURE OF PERSON FINGERPRINTED		LAST NAME: NAM		FIRST NAME		MIDDLE NAME					
REASON FOR PERSON FINGERPRINTED		ALIASES: AKA		O R L				DATE OF BIRTH: DOB Month: Day: Year:			
DATE		SIGNATURE OF OFFICIAL TAKING FINGERPRINTS		CITIZENSHIP: CTZ		SEX	RACE	HGT	WGT	EYES	HAIR
EMPLOYEE AND ADDRESS		FOUR NO.: OCA		FBI NO.: FBI		CLASS		PLACE OF BIRTH: POB			
REASON FINGERPRINTED		ARMED FORCES NO.: MNU		SOCIAL SECURITY NO.: SDC		REF		MISCELLANEOUS NO.: MNU			
						LEAVE BLANK					

1. R. THUMB		2. R. INDEX		3. R. MIDDLE		4. R. RING		LITTLE	
6. L. THUMB		5. L. INDEX		3. L. MIDDLE		4. L. RING		10. L. LITTLE	
LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY		L. THUMB		R. THUMB		RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY			

Sample