

ID Badge #: _____

INFORMATION REQUIRED FOR FINGERPRINTING

LAST NAME _____

FIRST NAME _____

MIDDLE NAME _____

HOME ADDRESS _____

DATE OF BIRTH (Month/Day/Year) _____

CITIZENSHIP (COUNTRY) _____

SEX _____ HAIR _____

HEIGHT _____ WEIGHT _____

EYES _____ RACE _____

PLACE OF BIRTH
(STATE OR COUNTRY) _____

SOCIAL SECURITY NO. _____

EMPLOYER'S NAME:

EMPLOYER'S PHONE No.:

HAIR

BLK BLACK
BRO BROWN
AUB AUBURN
RED RED
BLN BLOND
GRY GRAY
WHT WHITE
BLD BALD

EYES

BRO BROWN
BLU BLUE
GRY GRAY
HZL HAZEL
PNK PINK
MIX MIXED

RACE CODE

A ASIAN OR PACIFIC ISLANDER INCLUDES
HAWAIIAN OF PART-HAWAIIAN, FILIPINO,
SAMOAN, JAPANESE, CHINESE
B BLACK OR AFRO-AMERICAN
I AMERICAN INDIAN OR ALASKAN NATIVE
W WHITE
U UNKNOWN

HEIGHT

5 FEET	60"	5 FEET 7 INCHES	67"
5 FEET 1 INCH	61"	5 FEET 8 INCHES	68"
5 FEET 2 INCHES	62"	5 FEET 9 INCHES	69"
5 FEET 3 INCHES	63"	5 FEET 10 INCHES	70"
5 FEET 4 INCHES	64"	5 FEET 11 INCHES	71"
5 FEET 5 INCHES	65"	6 FEET	72"
5 FEET 6 INCHES	66"	6 FEET 1 INCH	73"