Fingerprinting Information Form

Date_____

Full **Legal** Name**:**_____SSN**:**_____

Current Residence:_____

_____

Country of Residence:_____ Aliases (AKA):_____

Sponsoring Agency**:** BLM ____BIA_____NPS_____FWS_____Other(list):_____

Federal Employee:_____Contractor:_____ Other(list):_____

Supervisor:_____

DOB (Year, month, date)_____Birthplace (State)_____

Height: Ft._____ Inches:_____ Weight:_____

Gender: Female_____Male_____

Race: Asian____Black____Native American____Caucasian/Latino____Other____

Hair Color_____

Bal – Bald

Blk – Black

Bln – Blonde or Strawberry

Bro – Brown

Gry – Gray or Partially Gray

Red – Red or Auburn

Whi – White

Sdy – Sandy

Color Eyes_____

Blk – Black

Blu – Blue

Bro – Brown

Grn – Green

Gry – Gray

Haz – Hazel

06/14/10