

APPLICANT

LEAVE BLANK

TYPE OR PRINT ALL INFORMATION IN BLACK
LAST NAME NAM FIRST NAME MIDDLE NAME

EBI

LEAVE BLANK

Doe Jane Smith

SIGNATURE OF PERSON FINGERPRINTED

Jane S. Doe

ALIASES AKA

Jane Marie Smith

OR
I

WYRN Board
101 DeedR Sklp2
Charleston, WV 25311

DATE OF BIRTH DOB
Month Day Year
01 01 1988

RESIDENCE OF PERSON FINGERPRINTED

100 Butterfield Ln
Charleston WV 25311

CITIZENSHIP CITZ

United States

SEX

RACE

HT

WT

EYES

HAIR

PLACE OF BIRTH POB

F

W

5'2"

110

blue

brn

Charleston WV

DATE

SIGNATURE OF OFFICIAL TAKING FINGERPRINTS

3/7/08

EMPLOYER AND ADDRESS

FOIA NO. FOIA

(leave blank)

FBI NO. FBI

(leave blank)

ALIAS PLACES NO. MNU

(leave blank)

SOCIAL SECURITY NO. SOC

000-00-0000

MISCELLANEOUS NO. MNU

(leave blank)

LEAVE BLANK

BY WHOM FINGERPRINTED

Licensure

1. R. THUMB

2. R. INDEX

3. R. MIDDLE

4. R. RING

5. R. LITTLE

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

FEDERAL BUREAU OF INVESTIGATION
 UNITED STATES DEPARTMENT OF JUSTICE
 CJIS DIVISION/CLARKSBURG, WV 26306

1. LOOP



CENTER
OF LOOP

APPLICANT

TO OBTAIN CLASSIFIABLE FINGERPRINTS:

1. USE BLACK INK ON A WHITE BACKGROUND.
2. DISTRIBUTE INK EVENLY ON THE SLAB.
3. WASH AND DRY HANDS THOROUGHLY.
4. DO NOT TOUCH THE SLAB OR INK WITH ANY OF THE FOLLOWING: FINGER, NAIL, OR OBJECT.
5. DO NOT WASH OR TOUCH THE SLAB UNTIL YOU HAVE DRYED YOUR HANDS COMPLETELY.
6. DO NOT WASH OR TOUCH THE SLAB UNTIL YOU HAVE DRYED YOUR HANDS COMPLETELY.
7. DO NOT TOUCH THE SLAB UNTIL YOU HAVE DRYED YOUR HANDS COMPLETELY.
8. DO NOT TOUCH THE SLAB UNTIL YOU HAVE DRYED YOUR HANDS COMPLETELY.
9. DO NOT TOUCH THE SLAB UNTIL YOU HAVE DRYED YOUR HANDS COMPLETELY.
10. DO NOT TOUCH THE SLAB UNTIL YOU HAVE DRYED YOUR HANDS COMPLETELY.

THIS CARD FOR USE BY:

LEAVE THIS SPACE BLANK

1. AN EMPLOYMENT AGENCY OR FINGERPRINTING AGENCY FOR LAW ENFORCEMENT PURPOSES.
2. OFFICIAL OF STATE AND LOCAL GOVERNMENTS FOR PURPOSES OF EMPLOYMENT, SECURITY, AND PERMITS AS AUTHORIZED BY STATE LAWS AND APPROVED BY THE ATTORNEY GENERAL OF THAT STATE, COUNTY, CITY, AND COUNTY OR LOCAL GOVERNMENT SPECIFICALLY BASED ON APPLICABLE STATE STATUTES DO NOT EXEMPT THIS REQUIREMENT.
3. U.S. GOVERNMENT AGENCIES AND OTHER ENTITIES REQUIRED BY FEDERAL LAW.
4. OFFICIALS OF FEDERALLY CHARTERED OR INSURED BANKING INSTITUTIONS TO PROMOTE OR MAINTAIN THE SECURITY OF THOSE INSTITUTIONS.

INSTRUCTIONS:

1. PRINTS MUST FIRST BE CHECKED THROUGH THE APPROPRIATE STATE IDENTIFICATION BUREAU, AND ONLY THOSE FINGERPRINTS FOR WHICH NO DISQUALIFYING RECORD HAS BEEN FOUND LOCALLY SHOULD BE SUBMITTED FOR FBI SEARCH.
 2. PRIVACY ACT OF 1974 (PL. 93-502) REQUIRES THAT FEDERAL STATE OR LOCAL AGENCIES INFORM INDIVIDUALS WHOSE SOCIAL SECURITY NUMBER IS REQUESTED WHETHER SUCH DISCLOSURE IS MANDATORY OR VOLUNTARY, BASIS OF AUTHORITY FOR SUCH SOLICITATION AND USES WHICH WILL BE MADE OF IT.
 3. IDENTITY OF PRIVATE CONTRACTORS SHOULD BE SHOWN IN SPACE 14 (TYPE AND ADDRESS). THE CONTRIBUTOR IS THE NAME OF THE AGENCY SUBMITTING THE FINGERPRINT CARD TO THE FBI.
 4. FBI NUMBER, IF KNOWN, SHOULD ALWAYS BE FURNISHED IN THE APPROPRIATE SPACE.
- MISC. LANGUAG. NO. (L) RECORD - OTHER ARMED FORCES NO. PASSPORT NO. (P) ALIEN REGISTRATION NO. (AR) PORT SE. CURRY CARD NO. (C) SELECTIVE SERVICE NO. (SS) VETERANS ADMINISTRATION CLAIM NO. (VA)

WVSP 39
1/03

FINGERPRINT AUTHORIZATION
Type or Print ALL Information

if applicable
(Facility Number)

Address of Applicant Jane S. Doe, 100 Butterfield Ln, Charleston, WV 25311

Certification: I hereby request a record check be made to find any police record on the herein named individual and by submitting this request, I understand that the submitted information will be retained by the West Virginia State Police in the Automated Fingerprint Identification System. I certify that this is for official business and I am authorizing WV RN Board to obtain any record found.

Jane S. Doe
(Signature)

101 Dee Dr, Ste 102
Charleston, WV
(Address) 25311