

APPLICANT

* See Privacy Act Notice on Back

LEAVE BLANK

TYPE OR PRINT ALL INFORMATION IN BLACK

FBI LEAVE BLANK

LAST NAME NAM FIRST NAME MIDDLE NAME

ALIASES AKA O R I

FD-258 (Rev. 9-9-13) 1110-0046

SIGNATURE OF PERSON FINGERPRINTED

RESIDENCE OF PERSON FINGERPRINTED

DATE OF BIRTH DOB
Month Day Year

CITIZENSHIP CTZ SEX RACE HGT. WGT. EYES HAIR PLACE OF BIRTH POB

DATE SIGNATURE OF OFFICIAL TAKING FINGERPRINTS

YOUR NO. OCA

LEAVE BLANK

EMPLOYER AND ADDRESS

FBI NO. FBI

CLASS _____

ARMED FORCES NO. MNU

REF. _____

REASON FINGERPRINTED

SOCIAL SECURITY NO. SOC

MISCELLANEOUS NO. MNU

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

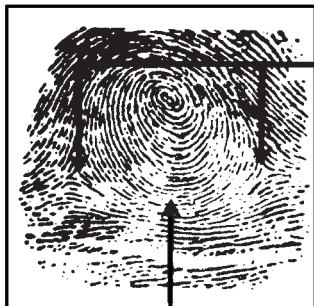


CENTER OF LOOP

DELTA

THE LINES BETWEEN CENTER OF LOOP AND DELTA MUST SHOW

2. WHORL



DELTA

THESE LINES RUNNING BETWEEN DELTAS MUST BE CLEAR

3. ARCH



ARCHES HAVE NO DELTAS

APPLICANT

THIS CARD FOR USE BY:

1. LAW ENFORCEMENT AGENCIES IN FINGERPRINTING APPLICANTS FOR LAW ENFORCEMENT POSITIONS.*
2. OFFICIALS OF STATE AND LOCAL GOVERNMENTS FOR PURPOSES OF EMPLOYMENT, LICENSING, AND PERMITS, AS AUTHORIZED BY STATE STATUTES AND APPROVED BY THE ATTORNEY GENERAL OF THE UNITED STATES. LOCAL AND COUNTY ORDINANCES, UNLESS SPECIFICALLY BASED ON APPLICABLE STATE STATUTES DO NOT SATISFY 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.

Please review this helpful information to aid in the successful processing of hard copy criminal and civil fingerprint submissions in order to prevent delays or rejections. Hard copy fingerprint submissions must meet specific criteria for processing by the Federal Bureau of Investigation. Ensure all information is typed or legibly printed using blue or black ink.

Enter data within the boundaries of the designated field or block.

Complete all required fields. (If a required field is left blank, the fingerprint card may be immediately rejected without further processing.)

- * The required fields for hard copy fingerprint cards are: originating agency identifier number - date of birth - place of birth - name - sex fingerprint impressions - any applicable state stamp - Other (race, height, weight, eye color, hair color)

- * criminal fingerprint cards also require an arrest charge and date of arrest.
- * civil fingerprint cards also require a reason fingerprinted and date fingerprinted

Do not use highlighters on fingerprint cards.

Do not enter data or labels within 'Leave Blank' areas.

Ensure the 'Reply Desired' field is checked when applicable (criminal only).

Ensure fingerprint impressions are rolled completely from nail to nail.

Ensure fingerprint impressions are in the correct sequence.

Ensure notations are made for any missing fingerprint impression (i.e. amputation).

Do not use more than two rebats per fingerprint impression block.

Ensure no stray marks are within the fingerprint impression blocks.

Training aids can be ordered online via the Internet by accessing the FBI's website at: fbi.gov, click on 'Fingerprints', then click on 'Ordering Fingerprint Cards & Training Aids'. Direct questions to the Identification and Investigative Services Section's Customer Service Group at (304) 625-5590 or by e-mail at claisson@leo.gov.

PRIVACY ACT STATEMENT

Authority: The FBI's acquisition, preservation, and exchange of I/Q/I/H/S/L/Q/V DCG/DV/RFD/MG information is generally authorized under 8 6 & 534. Depending on the nature of your application, supplemental authorities include Federal statutes, 6tate statutes SX/U/XD/Q/W Pub.L. 92-544, Presidential (xecutive 2 rders, DCG/I/H-H/D) Providing \ RX/U/I/Q/H/S/L/Q/V DCG/DV/RFD/MG IQR/RP DMRQ/LV YRQ/QDU KRZ/HY/HJ I/Q/I/H/V/R GR VR P D. D/I/H-FV/RP SGN/RQ/RU/SSUR/YDCR \ RX/UD/SS/D/MDRQ

Social Security Account Number (SSAN). Your SSAN is needed to keep records accurate because other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 USC 552a), the requesting agency is responsible for informing you whether disclosure is mandatory or voluntary, by what statutory or other authority your SSAN is solicited, and what uses will be made of it. Executive Order 9397 also asks Federal agencies to use this number to help identify individuals in agency records.

Principal Purpose: Certain determinations, such as employment, licensing, and V-FX/U/V/R/D/DQ/F/H may be predicated on fingerprint-based ED/NL/R/C/G checks. Your fingerprints DCG/DV/RFD/MG information ERP HMEV/P ay be SUR/G/H/V/VH/HP SR/LQ/ I/Q/H-M/D/DQ/ R/R/M-HZ/L/H U/H/SR/Q/E@/D/H-C/F. DCG/DV/RFD/MG 5 R/X/Q/H/8 V/H/D/V may be published at any time in the Federal Register, including the 5 outline 8ses for the 1 * , V VMP DCG/W/H) BI's Blanket Routine Uses Routine uses include, but are not limited to, disclosures to: HP SR/LQ/ JRY/H/QP/H/Q/D) or authorized non-governmental agencies responsible for employment, contracting licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

Routine Uses: ' XU/IQ/ V/H-SR/H-MQ/ R/ V/MV/SS/D/MDRQ DCG/I/R/D/ (Q/I) V/H-H/D/M/D/V \ RX/U/I/Q/H/S/L/Q/V DCG/DV/RFD/MG IQR/RP DMRQ ERP HMEV/DH U/H/Q/H/G/IQ/1 * , \ RX/U/IQR P DMRQ P D. EH G/V/G/V/H/G SX/U/XD/Q/V/R \ RX/UF/RQ/H-Q/VDC/P D. EH G/V/G/V/H/G Z U/RX/W our consent as permitted by the Privacy Act of 1974 DCG/DV/RFD/MG 5 R/X/Q/H/8 V/H/D/V may be published at any time in the Federal Register, including the 5 outline 8ses for the 1 * , V VMP DCG/W/H) BI's Blanket Routine Uses Routine uses include, but are not limited to, disclosures to: HP SR/LQ/ JRY/H/QP/H/Q/D) or authorized non-governmental agencies responsible for employment, contracting licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

Additional Information: The requesting agency and/or the agency conducting the application-investigation will provide you additional information pertinent to the specific circumstances of this application, which may include identification of other authorities, purposes, uses, and consequences of not providing requested information. In addition, any such agency in the Federal Executive Branch has also published notice in the Federal Register describing any system(s) of records in which that agency may also maintain your records, including the authorities, purposes, and routine uses for the system(s).

INSTRUCTIONS:

- * 1. PRINTS MUST GENERALLY 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. IDENTITY OF PRIVATE CONTRACTORS SHOULD BE SHOWN IN SPACE "EMPLOYER AND ADDRESS". THE CONTRIBUTOR IS THE NAME OF THE AGENCY SUBMITTING THE FINGERPRINT CARD TO THE FBI.
3. FBI NUMBER, IF KNOWN, SHOULD ALWAYS BE FURNISHED IN THE APPROPRIATE SPACE.

** MISCELLANEOUS NO. - RECORD: OTHER ARMED FORCES NO. PASSPORT NO. (FP), ALIEN REGISTRATION NO. (AR), PORT SECURITY CARD NO. (PS), SELECTIVE SERVICE NO. (SS) VETERANS' ADMINISTRATION CLAIM NO. (VA).