



Fingerprint Card Instructions

To request fingerprint cards, email your request to licensing@azdfi.gov; mail in your request; or fax us your request at (602) 381-1225.

Fingerprint cards are forwarded to the Arizona Department of Public Safety for processing by the Federal Bureau of Investigation. The FBI sets the following rules for the submission of fingerprint cards:

One card per person

- **ORI Field on fingerprint card must have Phoenix, AZ information or be blank.** It cannot have another State's information in that field.
 - **Do not use a highlighter on the fingerprint card.** The FBI's scanners cannot record the information if the card contains highlighter marks.
 - **Do not overlap the borders of the block in which you enter information.** The scanners cannot read information that overlaps the block.
 - **Do not use whiteout on the fingerprint card.** If information on the card needs to be changed, you may use a white address label affixed within the blue borders of the block.
 - **Do not overlap any information into the actual fingerprint area.**
 - **Do not enter any information in the block entitled "Employer and Address".** The Department will enter this information.
 - **Do not enter any information in the block entitled "Reason Fingerprinted".** The Department will enter this information.
 - **Do not alter any preprinted information on the fingerprint card.**
- Failure to adhere to these guidelines may result in the fingerprint card being returned and a new card required to be submitted.

Fingerprint fees must be on a separate check if other fees are being enclosed. Make check payable to: Arizona Department of Financial Institutions.

You may use any fingerprint card that is identical to the one show below, as long as there is no preprinted information on the card. All fields must be blank unless received from the Arizona Department of Financial Institutions. Do not write in any field marked "Leave Blank". Complete all remaining identifying information fields. If there are fields that do not apply, enter N/A.



APPLICANT		LEAVE BLANK //Leave Blank//		TYPE OR PRINT ALL INFORMATION IN BLACK LAST NAME <u>NAM</u> FIRST NAME MIDDLE NAME			FBI LEAVE BLANK //Leave Blank//			
SIGNATURE OF PERSON FINGERPRINTED		ALIASES <u>AKA</u>		O R I //Leave Blank//				DATE OF BIRTH <u>DOB</u> Month Day Year		
RESIDENCE OF PERSON FINGERPRINTED		CITIZENSHIP <u>CTZ</u>			SEX	RACE	HGT	WGT	EYES	HAR
DATE	SIGNATURE OF OFFICIAL TAKING FINGERPRINTS		YOUR NO. <u>OCA</u> //Leave Blank//		LEAVE BLANK					
EMPLOYER AND ADDRESS //Leave Blank//		FBI NO. <u>FBI</u>		//Leave Blank//						
REASON FINGERPRINTED //Leave Blank//		ARMED FORCES NO. <u>MNU</u>		CLASS _____						
		SOCIAL SECURITY NO. <u>SOC</u>		REF. _____						
		MISCELLANEOUS NO. <u>MNU</u> //Leave Blank//								

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	

Sample