|  |  |
| --- | --- |
|  | **Tennessee Department of Children’s Services**  **Fingerprint Card Information** |

**All information is required for fingerprinting and must be complete and accurate.**

***(Please Print All Information)***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **OIR #** | | **TN920190Z** | | **OCA #** | |  | |
| **Fingerprint Date:** |  | | **Fingerprint Time:** | | |  | | **A.M.**  **P.M.** | | **Fingerprint Location:** | | | | **Investigation ID#:** | | |
| **Complete Legal Name** | | | | **Date of Birth** | | | | | | **Related Case Name** | | | **Relative** | | | **Non-Relative** |
|  |  |  | | -       - | | | | | |  | | |  | | |  |
| *Last Name* | *First Name* | *Middle Name* | | *Month* | *Day* | | *Year* | | | *Name* | | |  | | | |
| **Complete Street Address** | | | | | | | | | | | | **Phone Number** | | | | |
|  | |  | | | | |  | |  | | |  | | | | |
| *Street* | | *City* | | | | | *State* | | *Zip Code* | | | *Phone #* | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Driver’s License Number** | **Issuing State** | **Reason for Printing** | | |
| (CD) | (FC) | (AD) |
| DCS Employee/Volunteer/Intern | Foster Care | Adoption |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Social Security Number (SSN)**        -       - | | | | | | | **Place of Birth** | | | | | | | | |
|  | | | | | | |  | | | | |  | | |  |
|  | | | | | | | *City* | | | | | *County* | | | *State* |
| **Military ID Number if different from SSN** | | | | | | | **Aliases Used** | | | | | | | | |
|  | | | | | | | (*Such as Maiden Name, previous Married Names, or any other legal name)* | | | | | | | | |
| Height | | | **Weight** | | | | **Gender/Sex**  **Male**  **Female** | | | | **Citizenship**  **USA  Other** | | | | |
|  |  | |  | | | |  | | | |  | | | | |
| ***Feet*** | ***Inches*** | | ***Pounds*** | | | |  | | | |  | | | | |
| **Hair Color** | | | | **Eye Color** | | | | **Race** | | | | | | | |
| **Brown** | |  | | **Blue** | |  | | **American Indian or Alaska Native** | | | | | |  | |
| **Black** | |  | | **Brown** | |  | | **Asian or Pacific Islander** | | | | | |  | |
| **Gray or partially gray** | |  | | **Gray** | |  | | **Black or African American** | | | | | |  | |
| **Blonde or Strawberry** | |  | | **Green** | |  | | **Hawaiian Native or Other Pacific Islander** | | | | | |  | |
| **Red or Auburn** | |  | | **Hazel** | |  | | **Hispanic or Latino** | | | | | |  | |
| **Sandy** | |  | | **Multicolor** | |  | | **White (non-Hispanic)** | | | | | |  | |
| **White** | |  | | **Other** |  | | | **Other** | |  | | | | | |
| **Unknown or Bald** | |  | | **Unknown** | |  | | **Unknown** | | | | | |  | |
| Results to **:** |  | | | Fax #: | **(****)** **-** | | | | Applicant Signature: | | | |  | | |