

FINGERPRINT INSTRUCTIONS

NOTE: Fingerprint cards and/or processing fees received by the Division will be returned for the following reasons:

- ✓ **No Application**
- ✓ **Incomplete / Incorrect Card**
- ✓ **No Verification Form**
- ✓ **Incorrect Fee**

Fingerprints are required for securities industry applicants pursuant to A.R.S. § 44-1945.A.8, A.R.S. § 44-3153.C.6, A.R.S. § 44-3156.C.3, and Rule R14-4-122. You must submit a fingerprint card to the Arizona Corporation Commission, Securities Division, as follows:

- Use a fingerprint card provided by the Arizona Corporation Commission. All spaces must be completed in **black ink only**. You must clearly print all information on the card except for the signature. If the card is incomplete, it will be returned to the Firm/Applicant. Do *not* highlight any of the fingerprint sections of the card.
- Have a clear set of fingerprints applied to the fingerprint card by the professional fingerprinting technician.
- Make sure that the fingerprint technician
 - verifies your identity using your government-issued photo ID;
 - completes the Fingerprint Verification Form;
 - seals the Fingerprint Verification Form along with the completed fingerprint card in the fingerprint card envelope provided or in any envelope sized to fit the card.
- Submit the **SEALED/UNOPENED ENVELOPE** containing the completed fingerprint card and Fingerprint Verification Form to the Arizona Corporation Commission. If the envelope is opened, the fingerprint card will be rejected.
- Submit the FBI fingerprint card processing fee (\$22.00 for each card) in conjunction with your submission of the completed fingerprint card.
 - **NOTE:** The FBI fingerprint card processing fee should be made payable to the Arizona Corporation Commission in the form of a check, cashier's check or money order. The Arizona Corporation Commission will not accept checks that do not have a check number and preprinted name and address of the account holder.

FINGERPRINT CARD LEGEND

One fingerprint card is required for each person. If your fingerprint card is rejected by the Arizona Department of Public Safety, you will be required to provide another card. Do not fold, bend, staple or punch holes in the card.

To establish uniform reporting of information, the following guidelines are provided:

Applicant's full name: Last name, First name, Middle name sequence (do not use initials).

Aliases (AKA): You must enter all other names; including maiden and married names.

Signature of person fingerprinted: Applicant to sign in **BLACK INK.**

Residence of person fingerprinted: Enter applicant's residential address and not mailing address.

ORI: Only fingerprint cards indicating the Arizona Central State Repository (AZDPS2000) may be used.

Date of birth (DOB): MM/DD/YYYY format **Place of birth:** Enter state abbreviation (e.g. AZ)

Date: This is the date the applicant was fingerprinted.

Signature of Official taking prints: To be completed by the fingerprint technician.

Sex: M for Male, F for Female **Social Security Number:** Enter number in XXX-XX-XXXX format. Leave blank if applicant does not have one.

Race: Enter the one letter abbreviation for race.

A	Asian/Pacific Islander
B	Black
I	American Indian or Alaskan Native
W	White or Hispanic
U	Unknown

Height: Enter the height in feet and inches **Weight:** Enter your weight in pounds

Eyes: Black	BLK	Gray	GRY	Pink	PNK
Blue	BLU	Green	GRN	Maroon	MAR
Brown	BRO	Hazel	HAZ	Multicolored.....	MUL

Hair: Bald	BLD	Brown	BRO	Sandy	SDY
Black	BLK	Gray	GRY	White.....	WHI
Blonde	BLN	Red/Auburn...	RED	Bald	XXX

EXAMPLE

APPLICANT		LEAVE BLANK		TYPE OR PRINT ALL INFORMATION IN BLACK				FBI		LEAVE BLANK	
		LAST NAME: <u>NAM</u>		FIRST NAME: <u>VADER</u>		MIDDLE NAME: <u>DARTH</u>		LAST NAME: <u>JAMES</u>			
SIGNATURE OF PERSON FINGERPRINTED		ALIASES: <u>AKA</u>		O R I D P S A Z D P S 2 0 0 O P E R A T I O N S P H O E N I X A Z		DATE OF BIRTH: <u>DOB</u>					
SIGNATURE OF APPLICANT		BADGUY, GUS				Month: <u>05</u> Day: <u>05</u> Year: <u>1955</u>		PLACE OF BIRTH: <u>POB</u>			
RESIDENCE OF PERSON FINGERPRINTED		STREET ADDRESS: <u>VADER, JAMES</u>		CITIZENSHIP: <u>CIT</u>		M <u>M</u> W <u>W</u> 604 <u>604</u> 300 <u>300</u> BLK <u>BLK</u> BLK <u>BLK</u>		AZ <u>AZ</u>			
DATE		SIGNATURE OF OFFICIAL TAKING FINGERPRINTS		YOUR NO: <u>OCA</u>		LEAVE BLANK					
EMPLOYER'S NAME AND ADDRESS		NAME OF AGENCY: <u>EBJ</u>		FBI NO: <u>EBJ</u>		CLASS					
MAILING ADDRESS		CITY, STATE, ZIP		ARMED FORCES NO: <u>MNU</u>		REF.					
REASON FOR SUBMISSION		SOCIAL SECURITY NO: <u>SOC</u>		555-55-5555							
STATUTORY AUTHORITY		MI									

➔ ROLL PRINTS

Right thumb



1

Right middle finger

Right ring finger

Right little finger

1. R. THUMB

2. R. INDEX

3. R. MIDDLE

4. R. RING

5. R. LITTLE

➔ ROLL PRINTS

Left thumb

Left index finger

Left middle finger

Left ring finger

Left little finger

6. L. THUMB

7. L. INDEX

8. L. MIDDLE

9. L. RING

10. L. LITTLE

➔ PRESS PRINTS FLAT

Left four fingers taken at the same time

Left

Right



2

FINGERPRINT VERIFICATION FORM

ATTENTION FINGERPRINT TECHNICIAN:

Please follow the instructions below for fingerprinting this applicant.

1. Please fill out or ensure that the applicant has filled out all the required boxes on the fingerprint card prior to taking the fingerprints.
2. Request a valid, unexpired government-issued photo ID from the applicant and compare the physical descriptors on the applicant's photo ID to the applicant and to the information on the fingerprint card.
3. Fill out the information in the boxes below. Please print clearly.
4. Once the prints have been taken, place the fingerprint card and this form into the envelope provided and seal it. Return the sealed envelope to the applicant. *Do not give the applicant the card without first sealing it inside the envelope.*

PRINT the following information:

Date:	Name of Applicant:
Name of Fingerprint Technician (PRINT):	
Fingerprint Technician's Signature:	
Fingerprint Technician's Agency/Company Name:	
Type of Photo ID provided (check one):	
<input type="checkbox"/> Driver's License/MVD Issued ID	<input type="checkbox"/> Other (Please specify)
<input type="checkbox"/> Passport	_____

NOTIFICATION OF APPLICANT PRIVACY RIGHTS

Fingerprints are required for securities industry applicants pursuant to A.R.S. § 44-1945.A.8, A.R.S. § 44-3153.C.6, A.R.S. § 44-3156.C.3, and Rule R14-4-122. Your fingerprints will be used to check the criminal history records of the FBI. As an applicant you have a right to review and challenge information contained in the criminal history record obtained from the fingerprints you submitted for the purpose of licensing with the Arizona Corporation Commission, Securities Division. If you feel the information is inaccurate or incomplete it is your responsibility to review and challenge the information if that is your desire.

If you have a criminal history record, the officials making a determination of your suitability for employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record. You should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before officials deny you employment, license, or other benefit based on information in the criminal history record.

The procedures for obtaining a change, correction, or updating of your FBI criminal history record are set forth in Title 28, Code of Federal Regulations (CFR), Sections 16.30 through 16.34. Information on how to review and challenge your FBI criminal history record can be found at www.fbi.gov under "Services" and then "Identity History Summary Checks" or by calling (304) 625-5590.

To obtain a copy of your Arizona criminal history in order to review/update/correct the record, you can contact the Arizona Department of Public Safety Criminal History Records Unit at (602) 223-2222 to obtain a fingerprint card and a Review and Challenge packet. Information on the review and challenge process can be found on the DPS website at www.azdps.gov.