

PERSONAL IDENTIFICATION

SEE REVERSE SIDE FOR FURTHER INSTRUCTIONS

TYPE OR PRINT ALL INFORMATION IN BLACK

LAST NAME NAM

FIRST NAME

MIDDLE NAME

FBI

LEAVE BLANK

FD-353 (Rev. 5-15-17) 1110-0046

SIGNATURE OF PERSON FINGERPRINTED

FINGERPRINTS SUBMITTED BY

RESIDENCE OF PERSON FINGERPRINTED

DATE OF BIRTH

DOB

Month Day Year

DATE FINGERPRINTED

SEX

RACE

HGT.

WGT.

EYES

HAIR

PLACE OF BIRTH POB

PERSON TO BE NOTIFIED IN CASE OF EMERGENCY

NAME _____

SOCIAL SECURITY NO.

LEAVE BLANK

ADDRESS _____

MISCELLANEOUS NO.

CLASS _____

FINGERPRINTED BY

SCARS AND MARKS

REF. _____

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 FINGERSTAKEN SIMULTANEOUSLY

L. THUMB

R. THUMB

RIGHT FOUR FINGERSTAKEN SIMULTANEOUSLY

FEDERAL BUREAU OF INVESTIGATION
UNITED STATES DEPARTMENT OF JUSTICE
CRIMINAL JUSTICE INFORMATION SERVICES DIVISION, CLARKSBURG, WV 26306

PERSONAL IDENTIFICATION

To obtain classifiable fingerprints:

1. Use printer's ink.
2. Distribute ink evenly on inking slab.
3. Wash and dry fingers thoroughly.
4. Roll fingers from nail to nail, and avoid allowing fingers to slip.
5. Be sure impressions are recorded in correct order.
6. Notate in the appropriate finger blocks if applicant is missing one or more fingers for any reason. If not missing, all ten impressions must be provided with scars and deformities notated.
7. If some physical condition makes it impossible to obtain perfect impressions, submit the best that can be obtained.
8. Examine the completed prints to see if they can be classified, bearing in mind the following:

Most fingerprints fall into the patterns shown below. Other patterns occur infrequently and are not shown here.

**PASTE
PHOTO HERE

(OPTIONAL)**

FD-353 Personal Identification Privacy Act Statement

The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. The fingerprints and associated information that you have voluntarily provided may be used for humanitarian and identification purposes. Your fingerprints and associated information will be retained in the FBI's Next Generation Identification (NGI) system or its successor systems and will be searched against civil, criminal, and latent fingerprints in the NGI system. As long as your fingerprints and associated information are retained in NGI, they may be disclosed pursuant to your consent and may be disclosed without your consent as permitted by the Privacy Act of 1974, and all applicable Routine Uses for the NGI System. Submission of your Social Security Account Number on this form is voluntary but will assist the FBI to confirm your identity.