

**Voluntary Appeal File (VAF) Application Form**

You may apply electronically by visiting <https://www.edo.cjis.gov> or you may complete the following application. The VAF is offered for those who want the FBI to maintain information about themselves to avoid extended delays or erroneous denials with future firearm transfers. The submission of fingerprints is REQUIRED to process all VAF applications. Additionally, if a VAF application is being submitted by an attorney on behalf of their client, an *Authorization to Release* form MUST accompany the VAF application. The *Authorization to Release* form, a downloadable fingerprint card and/or additional VAF information can all be found at <https://www.edo.cjis.gov>.

**APPLICANT'S INFORMATION \* Denotes Required Fields**

<b>*Last Name:</b>		<b>*First Name:</b>	
Middle Name:			Suffix:
<b>*Date of Birth:</b>	<b>*Place of Birth:</b>	<b>*State of Residence:</b>	
<b>*Country of Citizenship:</b>	Social Security Number:	Miscellaneous Number (Driver's License, Military ID):	
Alien or Admissions Number ( <b>*mandatory if Country of Citizenship is other than U.S.</b> ):			
<b>*Race</b> (please check appropriate box): <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> American Indian or Native Alaskan <input type="checkbox"/> Unknown			
<b>*Ethnicity</b> (please check appropriate box): <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino		<b>*Sex</b> (please check appropriate box): <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other	

**APPLICANT'S ADDRESS**

<b>*Address:</b>	
<b>*City:</b>	<b>*State:</b>
<b>*Postal (Zip) Code:</b>	<b>*Country:</b>
Phone Number:	E-Mail:

**APPLICANT'S STATEMENT:** I give the information on this Voluntary Appeal File (VAF) application, and any supporting documentation provided therewith, voluntarily with the understanding that if my application is approved, I will be entered into the VAF maintained by the National Instant Criminal Background Check System Section of the FBI's Criminal Justice Information Services (CJIS) Division. I further voluntarily consent that the FBI may retain my application, any supporting documentation, and any research information relevant to the approval of my VAF application. I further understand if, at any time, I wish to be removed from the VAF, I can make such a request in writing to the FBI's CJIS Division, at the address below. I also understand if a disqualifying record is discovered after my entry into the VAF, the FBI's CJIS Division may remove my information from the VAF.

**\*APPLICANT'S SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**If this form does not include your signature, your VAF application cannot be processed. You may mail the signed VAF application, completed fingerprint card, and any supporting documentation to the following address:**

**FBI CJIS Division**  
**ATTN: Criminal History Analysis Team 1**  
**BTC 3**  
**1000 Custer Hollow Road**  
**Clarksburg, West Virginia 26306**

**PRIVACY ACT STATEMENT**

Authority: The collection of information on this form is authorized by 28 CFR 25.10(g).

Principal Purpose: The principal purpose of collecting the requested information is to allow the FBI to maintain information about you in the Voluntary Appeal File (VAF) for the purpose of preventing the future erroneous denial or extended delay by the National Instant Criminal Background Check System (NICS) of a transfer of a firearm, explosive, or associated permit. You do not have to provide the requested information to the FBI; however, failure to provide the requested information will result in the FBI's inability to retain your information in the VAF which may, in turn, result in a future erroneous denial or extended delay of a transfer of a firearm, explosive, or associated permit.

Social Security Account Number (SSAN): Your SSAN is requested to keep records accurate because other people may have the same name and date of birth. Your SSAN will be used to verify your identity. You are not required to provide your SSAN and failure to provide your SSAN will not result in a denial of your VAF application. However, failure to provide your SSAN may result in an increase of time to process your VAF application or requests for additional information to verify your identity.

Routine Uses: During the processing of your application and for as long thereafter as your information is retained in the VAF, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by 28 CFR Part 25, and applicable routine uses as set forth in the System of Records Notice for the NICS, DOJ/FBI-018, 63 FR 65223 (Nov. 25, 1998), as amended at 65 FR 78190 (Dec. 14, 2000), 66 FR 6676 (Jan. 22, 2001), 66 FR 8425 (Jan. 31, 2001), 66 FR 12959 (Mar. 1, 2001), and 82 FR 24147 (May 25, 2017). Routine uses include, but are not limited to, disclosures to local, state, tribal, and territorial criminal justice agencies to determine whether transferring a firearm, explosive, or related permit to you is prohibited by state or federal law or whether to grant or deny an appeal from a NICS transaction; and to courts or adjudicative bodies for the purposes of resolving litigation or anticipated litigation.

**PAPERWORK REDUCTION ACT STATEMENT**

Under the Paperwork Reduction Act, you are not required to complete this form unless it displays a valid OMB control number. The form takes approximately 10 minutes to complete.