

## BOCES DEPT.

Please write department requesting fingerprinting

TO BE COMPLETED BY NEW EMPLOYEE   PLEASE PRINT CLEARLY		
First Name		
Last Name		
Previous Name(s) Used (maiden)		
Middle Initial		
Street Address		
City, State, Zip		
Email Address		
Home/Contact Phone Number		
Preferred Contact	email / US Mail	
DOB		
Age		
Gender		
Height		
Weight		
Race		
Hispanic (yes or no) MUST ANSWER		
Hair Color		
Eye Color		
State Born		
American Citizen (yes or no)		
If Not, What Country Citizenship		
Social Security Number		

TO BE COMPLETED BY BOCES			
ORI Code/Zip	TEACH/13413		
Fingerprint Location	UTICA		
Date/Time			

The state of NY requires you to present one valid and not expired form of photo identification at your appointment. Please indicate below which photo identification you will bring with you on the day of your fingerprinting appointment.

0	Driver's License issued by a State or outlying possession of the US
0	Driver's License PERMIT issued by a State or outlying possession of the US
0	ID Card issued by a federal/state/local government agency or by a Territory of the US
O	State ID Card (or outlying possession of the US) with a seal or logo from State or State Agency
0	Commercial Driver's License issued by a State or outlying possession of the US
O	Canadian Driver's License
$\bigcirc$	Department of Defense Common Access Card
0	Employment Authorization Document that contains a photograph
O	Foreign Driver's License (Mexico and Canada Only)
0	Permanent Resident Card or Alien Registration Receipt Card (Form I-551)
0	US Tribal or Bureau of Indian Affairs Identification Card (Enhanced Tribal Card Only)
$\overline{\bigcirc}$	US Visa issued by US Dept. of Consular Affairs for travel to or within, or residence within, the US
$\bigcirc$	Military Dependent's Identification Card
$\bigcirc$	US Military Identification Card
$\bigcirc$	US Passport
O	Foreign Passport
0	Uniformed Services Identification Card (Form DD-1172-2)
0	US Coastguard Merchant Mariner Card
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