

ARIZONA CORPORATION COMMISSION

Fingerprint Card Submission Cover Sheet

	Applicant CRD #
Applicant Name:	
Applicant Phone # or Email Address:	
Firm Name:	
Firm Contact Name:	Phone #
The Division will return fingerprinting doc submitted in accordance with the instruction below to avoid delays in the application pro-	n packet. Please use the checklist

An application (U4 Filing) is on file for the applicant in the Web IARD/CRD system

The applicant's fingerprint card is complete

The fingerprint technician completed the Verification Form

The fingerprint card is in a sealed envelope

A fee payable to the Arizona Corporation Commission is included in the submission (check, money order or cashier's check)



ARIZONA CORPORATION COMMISSION

FINGERPRINT INSTRUCTIONS

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:

- 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 an appropriately sized envelope.
- Submit the SEALED/UNOPENED ENVELOPE containing the completed fingerprint card, Fingerprint Verification Form and Cover Sheet 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. **<u>Do</u>** 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.

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	GrayGRY	Pink PNK
	Blue BLU	Green GRN	Maroon MAR
	Brown BRO	Hazel HAZ	MulticoloredMUL
Hair:	Bald BLD	Brown BRO	SandySDY
	BlackBLK	GrayGRY	White WHI
	Blonde BLN	Red/AuburnRED	Bald XXX

EXAMPLE

APPLICANT	LEAVE BLANK	1000	TYPE OR P		RT	ME	M	AME		EBA	LEAVE BLANK
SIGNATURE OF APPLICANT SESSENCE OF FRESON ENGRAPMED STREET ADDRESS CITY, STATE, ZIP DATE SCHADUL OF GEFRALE LAKING ENGREPOLIS		BA	BADGUY, GUS VADER, JAMES		AZDPS2000 DPS-AFIS OPERATIONS DATE OF BIRTH DOB March DOP OF DOS DE					Month Day Teor	
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DATE SCHADUL OF GITTCH	TARNO INCOPENTS	1009	INO OCA		_		.00.1	200			
NAME OF AGENCY MAILING ADDRESS CITY, STATE ZIP			FBI NO FBJ		LEAVE BLANK						
REASON FOR SUBM STATUTORY AUTH		SOCI M	555-55-5555			60.					
➤ ROLL PRINTS Right thumb			Right midd	le finger		Rig	ght ring	g finge	er	Rig	ght little finger
ROLL PRINTS Left thumb	Left index finger	r	Left middle finger		Left ring finger					Left little finger	
→ PRESS PRINTS FL	7. L. PIGOS		E. I. MIDDLE			2,1,3	all all	NA.	68		2
Left four fingers take	n at the same time		Left	Right		-			A A		



ARIZONA CORPORATION COMMISSION

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 an appropriately sized envelope and seal it. Return the sealed envelope to the applicant.

 <u>Do not give the applicant the card without first sealing it inside an envelope. Do not fold, bend, staple or punch holes in the card.</u>

PRINT the following information:

Date:	Name of Applicant:			
Name of Fingerprint Technician (PRINT):				
E'				
Fingerprint Technician's Signature:				
Fingerprint Technician's Agency/Company Name:				
Type of Photo ID provided (check one):				
Driver's License/MVD Issued ID	Other (Please specify)			
Bitver's Electise/ivi v D issued ib	Other (Flease speerry)			
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.