

Fingerprint Information Form

Please print out this form, complete, and bring with you to your fingerprint appointment at the Windham SAU which is located at 19 Haverhill Road, Windham, NH.

****Please clearly hand write your responses****

- Complete name - Last, First:

- Date of birth:

- Place of birth (state only required):

- Home address:

- Please circle: Male Female

- Please circle - Race:

A=Asian B=Black I=American Indian U=Unknown W=White

- Eye color:

- Height:

- Weight:

