

Personal Identification Fingerprint Cards (FBI form FD-353)

Cards must be completed by typing or clearly printing all information in blue or black ink. Pencil entries are not acceptable. The following directions refer to the circled numbers on the sample Personal Identification fingerprint card and are addressed to you as the person completing the card.

1. *Last Name, First Name, Middle Name:* In the order listed on the card, enter all elements of your full legal name.
2. *Signature of Person Fingerprinted:* Self-explanatory.
3. *Fingerprints Submitted by:* Enter **Self-submission** in this block.
4. *Date of Birth:* Enter as **MMDDYY**. Be sure that the month and day entries are not transposed.
5. *Residence of Person Fingerprinted:* List your current full mailing address.

The diagram shows the layout of the Personal Identification Fingerprint Card (FD-353) with five numbered callouts:

- 1:** Points to the 'TYPE OR PRINT INFORMATION IN BLACK' section, which includes fields for 'LAST NAME', 'FIRST NAME', and 'MIDDLE NAME'.
- 2:** Points to the 'SIGNATURE OF PERSON FINGERPRINTED' field.
- 3:** Points to the 'FINGERPRINTS SUBMITTED BY' field.
- 4:** Points to the 'DATE OF BIRTH' field, which is divided into 'Month', 'Day', and 'Year'.
- 5:** Points to the 'RESIDENCE OF PERSON FINGERPRINTED' field.

Other fields visible on the card include 'DATE FINGERPRINTED', 'SEX', 'RACE', 'HTG.', 'WGT.', 'EYES', 'HAIR', 'PLACE OF BIRTH', 'SOCIAL SECURITY NO.', and 'LEAVE BLANK'.

Figure 1 - Personal Identification Card (FD form 358)

6. *Date Fingerprinted:* Enter the date the personal identification fingerprint card is completed.
7. *Sex:* Either **M** (male) or **F** (female).
8. *Race:* Use one of the following one-character codes. Note that “Hispanic” is not included in this list. For the purposes of maintaining the Central Repository database, Hispanic is considered an ethnicity and not a race. Hispanics generally identify themselves as either “white” or “black.”

- | | |
|----------|---|
| A | Asian |
| B | Black/African-American |
| I | American Indian or Alaskan Native |
| W | White/Caucasian |
| U | Unknown (Please try to avoid this code; it doesn't help the record check) |

The diagram shows a Personal Identification Card (FD form 358) with the following fields and labels:

- PERSONAL IDENTIFICATION** (Title)
- SEE REVERSE SIDE FOR FURTHER INSTRUCTIONS
- TYPE OR PRINT ALL INFORMATION IN BLACK** (Section Header)
- LAST NAME, FIRST NAME, MIDDLE NAME (Labels for name fields)
- SEX, LEAVE BLANK (Fields)
- SIGNATURE OF PERSON FINGERPRINTED (Field)
- FINGERPRINTS SUBMITTED BY (Field)
- DATE OF BIRTH (Field)
- DATE FINGERPRINTED (Field)
- SIGNATURE OF PERSON IN CASE OF EMERGENCY (Field)
- NAME (Field)
- SOCIAL SECURITY NO. (Field)
- MISCELLANEOUS NO. (Field)
- DATE OF BIRTH (Field) containing circled numbers: 6, 7, 8, 9, 10, 11, 12, 13

Figure 2 - Personal Identification Card (FD form 358)

9. *Height*: Enter your height in stocking feet, in feet and inches, using a total of three digits. (for example, 5'08").

10. *Weight*: Enter weight in pounds and round to the nearest pound; do not record fractions of pounds.

11. *Eyes*: Use one of the following three-character abbreviations to record your eye color. Be sure to record your actual, natural eye color and not the color of tinted contact lenses:

BLK	Black	GRN	Green
BLU	Blue	HAZ	Hazel
BRO	Brown	XXX	Unknown (or other than above).
GRY	Gray		

12. *Hair*: Use one of the three-character codes as listed below:

BAL	Bald	MUL	Multi-colored
BLK	Black	ONG	Orange
BLN	Blonde	RED	Red
BLU	Blue	SDY	Sandy
BRO	Brown	WHT	White
GRN	Green	XXX	Unknown (or other than above)
GRY	Gray (or partially gray)		

13. *Place of Birth*: Enter the city and state (or foreign country) in which you were born.

14. *Person to be Notified in Case of Emergency*: Leave this blank.

15. *Social Security Number*: Self-explanatory. If you have ever used a second Social Security Number, enter that as well and indicate which number is your current, legitimate Social Security Account number.

16. *Miscellaneous Numbers*: Enter your current driver's license number and issuing state.

17. *Fingerprinted by:* The person who rolls your fingerprints and verifies the information on the card will sign this entry, with printed name underneath the signature. Be sure the fingerprint-taker's agency name (e.g. Paola PD) and address are also noted. This information is particularly important to establish the legitimacy of the fingerprints.

PERSONAL IDENTIFICATION		TYPE OR PRINT ALL INFORMATION IN BLACK		FBI		LEAVE BLANK	
SEE REVERSE SIDE FOR FURTHER INSTRUCTIONS		LAST NAME	MIDDLE NAME	FIRST NAME			
SIGNATURE OF PERSON FINGERPRINTED		FINGERPRINTS SUBMITTED BY				DATE OF BIRTH	
RESIDENCE OF PERSON FINGERPRINTED		DATE FINGERPRINTED		SEX	RACE	HGT.	WGT.
PERSON TO BE NOTIFIED IN CASE OF EMERGENCY		SOCIAL SECURITY		EYES	HAIR	PLACE OF BIRTH	
NAME				LEAVE BLANK			
ADDRESS		MISCELLANEOUS NO.					
FINGERPRINTED BY		SCARS AND MARKS					

Figure 3 - Personal Identification Card (FD form 358)

18. *Scars and Marks:* Leave this blank.