Premier ESL Applicants:

Step 1-Complete Application Form

- Print and complete the <u>Applicant Information Form</u> (attached)
- Choose response option 2 for a mailed copy and access to the web portal

Step 2-Get Fingerprinted

- Print two (2) standard fingerprint forms (FD258) on regular printer paper (attached)
- Complete the fields highlighted in yellow on the top section of BOTH fingerprint forms.
- Contact your local law enforcement agency (local police, sheriff's department) to make
 arrangements to have your hard copy ink fingerprints taken directly on each of the two
 fingerprint forms. Photocopies of your fingerprints are not permitted. If you are
 fingerprinted on a different FBI FD-258 card, be sure to write "Premier ESL" in the
 OCA field as shown on the attached form.
- Individuals may NOT fingerprint themselves; fingerprints MUST be obtained from a law enforcement agency or through Accurate Biometrics or a local fingerprint vendor pursuant to the Departmental Order Requirements.

Step 3-Mail the Required Items

Mail your completed packet with all 4 documents listed below to the following address:

- 1. Signed applicant information form (see step 1)
- 2. One original, complete Fingerprint form: FD258 (see step 2)
- 3. Second, original, complete Fingerprint form: FD258 (see step 2)
- 4. Completed Payment Form or Money Order

\$50-Mail/Portal Option 2

Mail to Address:

Accurate Biometrics
Departmental Order-Pemier ESL
500 Park Blvd Suite 1260
Itasca, IL 60143

<u>IMPORTANT*</u> Fingerprints are processed and submitted to the FBI the day that we receive them. FBI regulations require that all responses of the background checks are deleted from our system in 30 days.

The results will be mailed back to your US address and you wil be able to access the results from our website as well. You should receive an email from Accurate Biometrics within 2 days of when we receive your fingerprints. You will need to access your results from our website within 30 days of when the prints are submitted. If you do not receive an email within 4 days of when we receive your fingerprints, please call Accurate Biometrics customer service (773) 685-5699.

(Rev 09/19/2018)

APPLICANT INFORMATION FORM



PRIVACY ACT STATEMENT: The FBI's acquisition, retention, and sharing of information submitted on this form is generally authorized under 28 USC 534 and 28 CFR 16.30-16.34. The purpose for requesting this information from you is to provide the FBI with a minimum of identifying data to permit an accurate and timely search of identity history identification records. Providing this information (including your Social Security Account Number) is voluntary; however, failure to provide the information may affect the completion of your request. The information reported on this form may be disclosed pursuant to your consent and may also be disclosed by the FBI without your consent pursuant to the Privacy Act of 1974 and all applicable routine uses. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. The form takes three minutes to complete.

Applicant Information * Indicates Require	ed Fields								
* Last Name	*Sex	*Race							
* First Name	*Height:	*Eye Color:							
Middle Name	*Weight:	*Hair Color:							
* Date of Birth	*Place of Birth (State or Country if outside US):								
* Phone Number									
* Address:	*City/St/Zip								
Social Security Number (SSN):									
Note: The SSN on line above is voluntary. Enter it only	dy if you want the last 4 digits	of your SSN to appear on your FBI response.							
* Email Address:									
Note: We will use your email address to send you a lin	k to pick your FBI Report res	sponse on our secure web portal.							
*U.S. Citizen or Legal Permanent Resident	Yes No If no, y	you must submit your request directly to the FBI							
*Please indicate preferred method of sending	g your FBI report to y	ou: (Choose just one option)							
Biometrics Customer Website. This service allows the 24 hours, after fingerprints are either processed using liverard(s) are submitted. You will get an email from us one FBI response report is available online for 30 days via y accessed or 30 days (whichever is shorter), the record is Option 2* – Includes Option 1 plus US Mail (First Number of additional copies requested. Additional Option 3* – Includes Option 1 plus 2-Day Priority Number of additional copies requested. Additional "Mail Results To" address – The name must be the na parties or "in care of" addresses). If response is being statement on the attorney's letterhead and INCLUDE Statement Name	we scan (electronic capture) of the your response has been retrour computer following the extra deleted. Class) to U.S. addresses only al copies are \$10 each and we service to U.S. addresses on al copies are \$10 each and we ame of the applicant indicated sent to the applicant's attorne	or card scan through our office if FBI FD-258 turned to us from the FBI. Online access to the email notice to the applicant. Once the report is y. Must complete address segment below. The added to your total processing charge. It was to the address area below. The address area below. The added to your total processing charge. It was added to your total processing charge.							
Applicant's Attorney Name (if applicable)									
*Address (No PO boxes, No "In Care Of" or Third	Parties) Required only for mo	ailing. It will not appear on the response form.							
*City *State		*Zip Code							
*Payment									
CASHIER'S CHECK / MONEY ORDER	CREDIT CARD (if by mail, ple	ease submit credit card form, available on our website							
*Reason for Request: To Review your own record To adopt a child To live, work, or travel in a foreign country To challenge information on your record Other Court-Related Matters. Please explain									
*APPLICANT SIGNATURE		DATE							

APP	LICANT	LEAVE BLANK	TYPE OR PRINT ALL INFORMATION IN BLACK LAST NAME NAM FIRST NAME MIDDLE NAME							FBI LEAVE BLANK		
* See Privacy	Act Notice on Back											
FD-258 (REV.1 SIGNATURE OF	F PERSON FINGERPR	RINTED	ALIASES	AKA	0				-			
					R I							
RESIDENCE OF PERSON FINGERPRINTED										DATE OF BIRTH Month Day	DOB Year	
			CITIZENSH	HIP CTZ	S	EX RACE	HGT.	WGT.	EYES	HAIR	PLACE OF BIRTH	POR
DATE	DATE SIGNATURE OF OFFICIAL TAKING FINGERPRINTS										THOE OF BIRTH	T OD
			YOUR NO.	mier ES		LEAVE BLANK						
EMPLOYER AND ADDRESS FBI N			FBI NO.	NO. FBI								
			ARMED FO	IED FORCES NO. MNU		CLASS .						
REASON FING	ERPRINTED		COCIAL SE									
			SOCIAL SE	AL SECURITY NO. SOC		REF.						
			MISCELLA	NEOUS NO. MN	NU							
										1		
1. R. THUMB		2. R. INDEX	3.	R. MIDDLE		4. R. I	RING			5. R. LIT	TLE	
6. L. THUMB		7. L. INDEX	8. 1	L. MIDDLE		9. L. F	RING			10. L. LI	TTLE	
LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY				L.THUMB	R. THUMB		RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY					

FEDERAL BUREAU OF INVESTIGATION UNITED STATES DEPARTMENT OF JUSTICE

CJIS DIVISION/CLARKSBURG, WV 26306

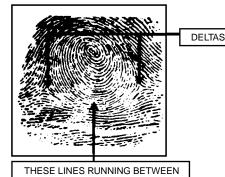
1. LOOP

APPLICANT

CENTER OF LOOP **DELTA**

THE LINES BETWEEN CENTER OF LOOP AND DELTA MUST SHOW

2. WHORL



3. ARCH

DELTAS MUST BE CLEAR



ARCHES HAVE NO DELTAS

FD-258 (REV. 12-10-07)

THIS CARD FOR USE BY:

- 1. LAW ENFORCEMENT AGENCIES IN FINGERPRINTING APPLICANTS FOR LAW ENFORCEMENT POSITIONS.*
- 2. OFFICIALS OF STATE AND LOCAL GOVERNMENTS FOR PURPOSES OF EMPLOYMENT, LICENSING, AND

PERMITS, AS AUTHORIZED BY STATE STATUTES AND APPROVED BY THE ATTORNEY GENERAL OF THE

UNITED STSTES. LOCAL AND COUNTY ORDINANCES, UNLESS SPECIFICALLY BASED ON

APPLICABLE STATE STATUTES DO NOT SATISFY THIS REQUIREMENT.*

- 3. U.S. GOVERNMENT AGENCIES AND OTHER ENTITIES REQUIRED BY FEDERAL LAW.**
- 4. OFFICIALS OF FEDERALLY CHARTERED OR INSURED BANKING INSTITUTIONS TO PROMOTE OR MAINTAIN

THE SECURITY OF THOSE INSTITUTIONS

Please review this helpful information to aid in the successful processing of hard copy criminal and civil fingerprint submissions in order to prevent delays

- rease leview has responding manufactured in the successing or hard copy clining and dwinning print submissions must meet specific criteria for processing by the Federal Bureau of Investigation. Ensure all information is typed or legibly printed using blue or black ink.

 Enter data within the boundaries of the designated field or block.
 - Complete all required fields. (If a required field is left blank, the fingerprint card may be immediately rejected without further processing.)

 The required fields for hard copy fingerprint cards are: originating agency identifier number date of birth place of birth name sex fingerprint impressions any applicable state stamp Other (race, height, weight, eye color, hair color)
 - criminal fingerprint cards also require an arrest charge and date of arrest.
 - * civil fingerprint cards also require a reason fingerprinted and date fingerprinted

Do not use highlighters on fingerprint cards.
Do not enter data or labels within 'Leave Blank' areas.
Ensure the 'Reply Desired' field is checked when applicable (criminal only).
Ensure fingerprint impressions are rolled completely from nail to nail.
Ensure fingerprint impressions are in the correct sequence.
Ensure notations are made for any missing fingerprint impression (i.e. amputation). Do not use more than two retabs per fingerprint impression block.
Ensure no stray marks are within the fingerprint impression blocks.

Training aids can be ordered online via the Internet by accessing the FBI's website at: fbi.gov, click on 'Fingerprints', then click on 'Ordering Fingerprint Cards & Training Aids'. Direct questions to the Identification and Investigative Services Section's Customer Service Group at (304) 625-5590 or by e-mail at iaison@leo.gov>.

PRIVACY ACT STATEMENT

Authority: The FBI's acquisition, preservation, and exchange of information requested by this form is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include numerous Federal statutes, hundreds of State statutes pursuant to Pub.L. 92-544, Presidential executive orders, regulations and/or orders of the Attorney General of the United States, or other authorized authorities. Examples include, but are not limited to: 5 U.S.C. 9101; Pub.L. 94-29; Pub.L. 101-604; and Executive Orders 10450 and 12968. Providing the requested information is voluntary; however, failure to furnish the information may affect timely completion or approval of your

Social Security Account Number (SSAN). Your SSAN is needed to keep records accurate because other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 USC 552a), the requesting agency is responsible for informing you whether disclosure is mandatory or voluntary, by what statutory or other authority your SSAN is solicited, and what uses will be made of it. Executive Order 9397 also asks Federal agencies to use this number to help identify individuals in agency records.

Principal Purpose: Certain determinations, such as employment, security, licensing, and adoption, may be predicated on fingerprint-based checks. Your fingerprints and other information contained on (and along with) this form may be submitted to the requesting agency, the agency conducting the application investigation, and/or FBI for the purpose of comparing the submitted information to available records in order to identify other information that may be pertinent to the application. During the processing of this application, and for as long hereafter as may be relevant to the activity for which this application is being submitted, the FBI may disclose any potentially pertinent information to the requesting agency and/or to the agency conducting the investigation. The FBI may also retain the submitted information in the FBI's permanent collection of fingerprints and related information, where it will be subject to comparisons against other submissions received by the FBI. Depending on the nature of your application, the requesting agency and/or the agency conducting the application investigation may also retain the fingerprints and other submitted information for other authorized purposes of such agency(ies).

Routine Uses: The fingerprints and information reported on this form may be disclosed pursuant to your consent, and may also be disclosed by the FBI without your consent as permitted by the Federal Privacy Act of 1974 (5 USC 552a(b)) and all applicable routine uses as may be published at any time in the Federal Register, including the routine uses for the FBI Fingerprint Identification Records System (Justice/FBI-009) and the FBI's Blanket Routine Uses (Justice/FBI-BRU). Routine uses include, but are not limited to, disclosures to: appropriate governmental authorities responsible for civil or criminal law enforcement, counterintelligence, national security or public safety matters to which the information may be relevant; to State and local governmental agencies and nongovernmental entities for application processing as authorized by Federal and State legislation, executive order, or regulation, including employment, security, licensing, and adoption checks; and as otherwise authorized by law, treaty, executive order, regulation, or other lawful authority. If other agencies are involved in processing this application, they may have additional routine uses

Additional Information: The requesting agency and/or the agency conducting the application-investigation will provide you additional information pertinent to the specific circumstances of this application, which may include identification of other authorities, purposes, uses, and consequences of not providing requested information. In addition, any such agency in the Federal Executive Branch has also published notice in the Federal Register describing any system(s) of records in which that agency may also maintain your records, including the authorities, purposes, and routine uses for the system(s).

INSTRUCTIONS:

- * 1. PRINTS MUST GENERALLY BE CHECKED THROUGH THE APPROPRIATE STATE IDENTIFICATION BUREAU, AND ONLY THOSE FINGERPRINTS FOR WHICH NO DISQUALIFYING RECORD HAS BEEN FOUND LOCALLY SHOULD BE SUBMITTED FOR FBI SEARCH.
- 2. IDENTITY OF PRIVATE CONTRACTORS SHOULD BE SHOWN IN SPACE "EMPLOYER AND ADDRESS". THE

CONTRIBUTOR IS THE NAME OF THE AGENCY SUBMITTING THE FINGERPRINT CARD TO THE FBI

- 3. FBI NUMBER, IF KNOWN, SHOULD ALWAYS BE FURNISHED IN THE APPROPRIATE SPACE.
- ** MISCELLANEOUS NO. RECORD: OTHER ARMED FORCES NO. PASSPORT NO. [FP], ALIEN REGISTRATION NO. (AR), PORT SECURITY CARD NO. (PS), SELECTIVE SERVICE NO. (SS) VETERANS' ADMINISTRATION CLAIM NO. (VA),