

REQUEST FOR CRIMINAL HISTORY RECORD INFORMATION WASIS/NCIC III CHECK NCIC/WACIC CHECK

| ☐ Routine ☐ Urgent | Date | e: | |
|---|--------------------------------|--|--|
| Type of request: | | | |
| Intake Furl | ough sponsor D | ☐ Volunteer☐ Contract employee☐ Prospective employee | |
| ESR/Risk Upd | late Field file | irearms requalification | |
| | | endor/maintenance worker ther: | |
| | | <u>-</u> | |
| | REQUIRED DATA | | |
| | | | |
| Legal name (Last, First, Middle) | Date of birth | DOC number | |
| Sex at birth Race | SID number | FBI number | |
| | OTHER DATA | | |
| Maiden name/alias | Birthplace | | |
| | | | |
| Maiden name/alias | Citizenship | | |
| Maiden name/alias | Hair | Eyes | |
| SSN | Height | Weight | |
| Current Washington State Driver license | s 🗌 No License number: | | |
| If driver's license is issued from another state, list | t which state: | | |
| Mail stop: | | | |
| Address of submitting office (if no mail stop) _ | | | |
| _ | | | |
| ☐ INTAKE/FOS - CASE MANAGER SUBMIT F | FINGERPRINT CARDS TO YOUR LOCA | AL RECORDS OFFICE | |
| | REQUESTER | | |
| | | | |
| | | | |
| Name | Signature | | |
| | | | |
| Title | Date | | |
| Employee of a 1Marton on the state of | Date | Initials | |
| Employment and Visitor requests only: | | IABS) D Vac D Na | |
| Clear Criminal History (NCIC/WACIC) Yes | ☐ No Clear Criminal History (J | | |
| Clear Wants and Warrants | No Clear Statewide Visit Sy | stem | |
| The contents of this document may be eligible for public will be redacted in the event of such a request. This form | | | |
| Distribution: ORIGINAL - Imaging file COPY - | As applicable | | |

DOC 05-370 (Rev. 03/04/22) E-form Scan Code VS11 Scan & Toss

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DOC 390.590, DOC 400.320, DOC 450.310, DOC 530.100, DOC 590.320, DOC 810.015