

FBI Clearance Information Sheet

Personal Information (required by FBI) – Please PRINT CLEARLY

Last Name: _____

First Name: _____

Middle Name: _____

Date of Birth: _____ (MM/DD/YYYY) Age: _____

Place of Birth City: _____

Place of Birth State: _____

County of Birth: _____

Gender: Male Female Race: _____

Eye Color: _____ Hair Color: _____

Height: _____ Weight: _____

Country of Citizenship: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Phone: _____

Prior Last Name(s): _____

Prior First Name(s): _____

Email: _____