

First Name

Date of Birth (MM/DD/YYYY)

Height ft. in.

Weight

Street Number

Street Name

City

State Zip

Social Security Number: - -

Contact Number:

Date of Application

M.I. Last Name

Race [Choose one](#)

(American Indian or Alaskan Native, Asian or Pacific Islander, Black, Unknown, White)

Sex Place of Birth

(Male, Female)

(State)

Hair Color [Choose one](#)

(Bald, Black, Blonde or Strawberry, Brown, Gray or Partially Gray, Other, Red or Auburn, Sandy, White)

Eye Color [Choose one](#)

(Black, Blue, Brown, Gray, Green, Hazel, Maroon, Multicolored, Other, Pink)

Build [Choose one](#)

(Emaciated, Heavy, Light, Medium, Obese)

Complexion [Choose one](#)

(Albino, Dark, Fair, Freckled, Light, Medium, Olive, Pimpled, Pock Marked, Ruddy, Sallow, Yellow)

Have you ever been charged with, convicted of, or plead guilty to a felony crime? Yes No

By supplying my information above, I hereby authorize the Louisiana State Police to release all pertinent criminal record information maintained in their files, other states files, or the FBI files (if applicable). Pursuant to Title 28, C.F.R., Section 16.34, officials making the determination of suitability for licensing or employment shall provide the opportunity to complete, or challenge the accuracy of, the information contained in the FBI identification record.