

FOR OFFICIAL USE ONLY

ILLINOIS

REQUIRED FORMS

- Illinois State Fingerprint Card
- OPM General Release Form

INSTRUCTIONS FOR SUBMISSION

- The subject of the investigation must complete the Illinois State Police Fingerprint Card. This form is required to search the Illinois State Criminal Repository and fulfill the requirements of Public Law 101-647.
 - While a completed Illinois State Police Fingerprint Card is preferred, an SF87 or FD258 fingerprint card may be substituted, as long as the following criteria are met:
 - The SF87/FD258 card is signed and dated.
 - The Illinois State Police Fingerprint Card is included and all required sections (sans the actual fingerprint images) are filled out.

OBTAINING STATE-SPECIFIC FINGERPRINT CARDS

- Illinois State Fingerprint cards (Fingerprint Request Form ISP6-404B) can be obtained by contacting the Illinois State Police using one of the following methods:
 - By Phone: (815) 740-5216
 - Online: <https://isp.illinois.gov/BureauOfIdentification/OutStateRequestForm>
 - By Mail: Illinois State Police Bureau of Identification, 260 North Chicago Street, Joliet, IL 60432

REQUIRED FIELDS – ILLINOIS STATE POLICE FINGERPRINT CARD

Required fields for versions dated 7/98 or 11/10 include:

- Last Name (First Name and Middle Name also preferred)
- Date of Birth
- Sex
- Race
- Date Fingerprinted
- Signature and Date

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(All fields marked in BOLD are mandatory)

CONVICTION INFORMATION REQUEST

Document Control Number

Submitting Agency ORI - NCIC (If applicable)

Transaction Control Number

L76815892

IL



FRM1030L76815892

Subject's Last Name

First Name

Middle Name/Suffix

Cost Center
(Office Use Only)

Date of Birth

State Identification Number (If applicable)

IL

Sex

Race

Drivers License Number

DL State

Requestor's Name

Agency/Company Name

Return Address

Street: _____ City: _____ State: _____ Zip: _____

Foreign State/Country

Foreign Postal Code

Date Fingerprinted: / /

Licensing or Employment Purpose

(Yes)

(No)

Subject's Maiden Last Name

First Name

Middle Name/Suffix

Fee Amount

Subject's Signature: _____

Date: / /

Fingerprint Images

1. R. THUMB	2. R. INDEX	3. R. MIDDLE	4. R. RING	5. R. LITTLE
6. L. THUMB	7. L. INDEX	8. L. MIDDLE	9. L. RING	10. L. LITTLE
LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY		L. THUMB	R. THUMB	RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY

ILLINOIS STATE POLICE
Bureau of Identification

INSTRUCTIONS FOR COMPLETING CONVICTION INFORMATION REQUEST FORMS

On January 1, 1991, the Uniform Conviction Information Act (UCIA) became law in Illinois. This act mandates that all criminal history record conviction information collected and maintained by the Illinois State Police, Bureau of Identification, be made available to the public pursuant to 20 ILCS 2635/1 et.seq. The Illinois State Police maintains Illinois criminal history record information only. The UCIA permits only conviction information to be disseminated to the public.

There are two types of Conviction Information Request forms which can be used to request UCIA information. Form is to be used to request a fingerprint based search. Form is to be used to request a name based search. Each form has a unique processing control number. Consequently, copies can not be processed. All inquiries must be submitted on an original form. Forms can be obtained by contacting the Illinois State Police at the address appearing on the front of this form or phone (815) 740-5216. Forms can also be ordered through the Internet by selecting the Criminal History Information - Request UCIA Forms on the Illinois State Police Internet Home Page. Our home page address is <http://www.state.il.us/isp/isphtmlpage.htm>.

Requests for UCIA information are to be made according to the following instructions. Failure to complete all required fields which are marked in **bold** will result in the return of the request unprocessed. **Also, failure to properly complete all required fields on the reverse side of this form resulting in an error, will require an additional fee upon resubmission.**

1. The requester must complete a Conviction Information Request for each conviction record requested. Maiden names must be included on form if name is to be searched.
2. Each request must contain the requester's complete return address.
3. Each request form must be accompanied by the correct fee in the form of a personal check, money order or cashier's check payable to the **ILLINOIS STATE POLICE**. Multiple requests may be submitted in the same envelope with a single check enclosed to cover the total cost for all requests.
4. The individual named in the request may initiate proceedings to challenge or correct a record furnished by the Illinois State Police by contacting the Bureau of Identification at (815) 740-5164.
5. The subsequent dissemination of conviction information furnished by the Illinois State Police is permitted only for the 30-day period immediately following receipt of the information.
6. The subjects complete and accurate name, sex, race and date of birth are required in order to check the Illinois criminal history record files. Without this information, the search of the Illinois criminal history record information files could be adversely affected.
7. Please do not include or attach any other correspondence.

IF THE REQUEST IS FOR EMPLOYMENT OR LICENSING PURPOSES, THE FOLLOWING ADDITIONAL INSTRUCTIONS APPLY

8. The individuals signature named in the request must be maintained by the agency/company in order to comply with the release of information act.
9. The requester must provide the individual named in the request with a copy of the response furnished by the Illinois State Police.
10. Within 7 working days of receipt of such copy, the individual named in the request must notify the Bureau of Identification as well as the requester if the information furnished by the Illinois State Police is inaccurate or incomplete.

NOTICE

Any person who intentionally and knowingly requests, obtains or seeks to obtain conviction information under false pretenses, disseminates inaccurate or incomplete conviction information or violates any other provision of 20 ILCS 2635/1 may be guilty of a crime punishable by up to one year of imprisonment and/or may incur civil liabilities.

Please mail this form to: Illinois State Police Bureau of Identification 260 North Chicago Street Joliet, IL 60432