INFORMATIONAL ATTACHMENT

ATTACH TO LSP AUTHORIZATION FORM WITH COPY OF DRIVER'S LICENSE

FN, MI, LN, Suffix:					
Address:					
Race:	□ American Indian or Alaskan Native				
	☐ Asian or Pacific Islander				
	□ Black				
	□ Unknown				
	□ White				
DOB:			Sex:	□ Male □ Female	
City & State of Birth:				Height:	
Hair Color:	□ Bald	□ Other		Weight:	
	□ Black	□ Red or A	ıburn	8	
	☐ Blond or Strawberry	□ Sandy			
	□ Brown	□ White			
Eye Color:	□ Gray/Partially Gray□ Black	□ Hazel			
Eye Color:	□ Blue	□ Maroon			
	□ Brown		ored		
	□ Gray	□ Other	orea		
	□ Green	□ Pink			
Driver's License #:				Driver's License	
				State of Issue:	
SSN:					
Complexion:	□ Albino	□ Olive			
_	□ Dark	□ Pimpled			
	□ Fair	□ Pock Marked			
	□ Freckled	\Box Ruddy			
	□ Light	□ Sallow			
	□ Medium	□ Yellow			
Build:	□ Emaciated				
	□ Heavy				
	□ Light				
	□ Medium				
	□ Obese				

This information is being provided to law enforcement for a criminal background check in connection with an adoption. The questions are taken directly from the online entry system. The Court recognizes the confidentiality of personal information and will not disseminate or release this information to any third party. This information is retained for three years for audit purposes and after that period of time will be destroyed. This information will NOT be filed in the suit record.