Butte County District Attorney's Office
Interns and Volunteers
Information Needed for Live Scan Fingerprinting Appointment

Name of Applicant _____
LAST First Middle

AKA's _____

Driver's License No. _____ State _____ Exp. Date _____

Date of Birth _____ Male ☐ Female ☐

Height _____ Weight _____ Hair Color _____ Eye Color _____

Place of Birth _____
City State Country

U.S Citizen ☐ Yes ☐ No

Home Address _____
Street City State Zip Code

How long at this address? _____ _____
Yrs. Mos.

College Address _____
Street City State Zip Code

Telephone # (_____) _____ Alternate (_____) _____