



Procedures for a Federal Background Check With e-Payment

- Use only an [FBI Applicant fingerprint card](#) for a federal background check. A [Request for Exemption from Electronic Fingerprint Submission Requirement](#) form must also be completed and submitted with the card. FBI cards and the release form must be submitted to BCI for processing, not the FBI.
- The fee for the FBI check is \$25.25. Go to the [e-Payment website](#) and follow the instructions. Once the payment has been made, write the ID number in the Reason Fingerprinted box.
- If you yourself are paying for the background check via e-Payment, write 1AB002 in the OCA box. Also, be sure to include the appropriate address in the box labeled Send Background Check Results To. If an agency is paying for the background check via e-Payment, write the agency's code in the OCA box and the results will be returned to the address for that agency code.
- Each fingerprint card must include all requested information (i.e., Social Security number, date of birth, sex, race, etc.). This information may be validated with a driver's license or photo ID card.
- When taking fingerprints, use only fingerprinting ink. Fingers should be rolled nail to nail.
- The Reason Fingerprinted field must include the ORC section number corresponding to the type of employment that is prompting the background check. An FBI background check can be processed only for work with children, work with the elderly, and certain types of licensing. If you need an FBI check done for a non-state-mandated reason, please contact the FBI at 540-868-1535.
- If any required information is missing or incomplete, fingerprint cards will be returned unprocessed.
- For questions regarding FBI background checks, please call BCI's Civilian Unit at 877-224-0043. Your cooperation is greatly appreciated.

Civilian Unit
Identification Division
Bureau of Criminal Investigation

Revised: 10-17-2024

APPLICANT
* See Privacy Act Notice on Back

LEAVE BLANK

TYPE OR PRINT ALL INFORMATION IN BLACK
LAST NAME FIRST NAME MIDDLE NAME

FBI

LEAVE BLANK

FD-258 (Rev. 5-15-17) 1110-0018

SIGNATURE OF PERSON FINGERPRINTED

ALIASES AKA

O
R
I

**OHBCI0000
ST BU
LONDON, OH**

RESIDENCE OF PERSON FINGERPRINTED

DATE OF BIRTH DOB
Month Day Year

CITIZENSHIP CTZ

SEX RACE HGT. WGT. EYES HAIR PLACE OF BIRTH POB

DATE SIGNATURE OF OFFICIAL TAKING FINGERPRINTS

YOUR NO. OCA

LEAVE BLANK

EMPLOYER AND ADDRESS

UNIVERSAL CONTROL NO UCN

CLASS _____

ARMED FORCES NO. MNU

REF. _____

REASON FINGERPRINTED

SOCIAL SECURITY NO. SOC

MISCELLANEOUS NO. MNU

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

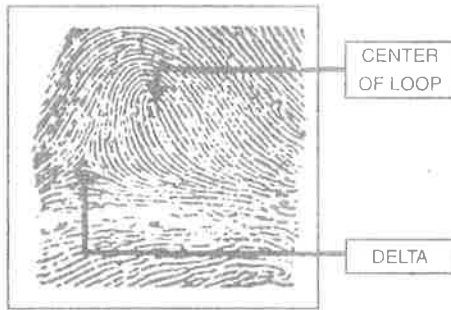
R THUMB

RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY

FEDERAL BUREAU OF INVESTIGATION
 UNITED STATES DEPARTMENT OF JUSTICE
 CJIS DIVISION/CLARKSBURG, WV 26306

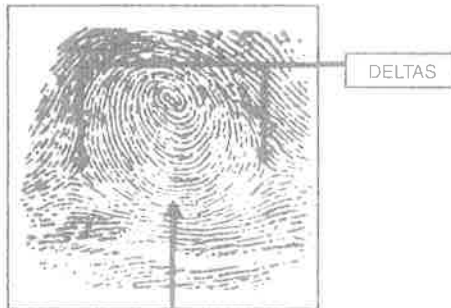
APPLICANT

1. LOOP



THE LINES WITHIN CENTER OF LOOP AND DELTA MUST SHOW

2. WHORL



THESE LINES RUNNING BETWEEN DELTAS MUST BE CLEAR

3. ARCH



ARCHES HAVE NO DELTAS

FD-258 (REV. 5-15-17)

U.S. GOVERNMENT PUBLISHING OFFICE:
 03/14/2019 08:07:50

THIS CARD FOR USE BY:

1. LAW ENFORCEMENT AGENCIES IN FINGERPRINTING APPLICANTS FOR LAW ENFORCEMENT POSITIONS
2. OFFICIALS OF STATE AND LOCAL GOVERNMENTS FOR PURPOSES OF EMPLOYMENT, LICENSING, AND PERMITS, AS AUTHORIZED BY STATE STATUTES AND APPROVED BY THE ATTORNEY GENERAL OF THE UNITED STATES. LOCAL AND COUNTY ORDINANCES, UNLESS SPECIFICALLY BASED ON APPLICABLE STATE STATUTES DO NOT SATISFY THIS REQUIREMENT.
3. U.S. GOVERNMENT AGENCIES AND OTHER ENTITIES REQUIRED BY FEDERAL LAW.
4. OFFICIALS OF FEDERALLY CHARTERED OR INSURED BANKING INSTITUTIONS TO PROMOTE OR MAINTAIN THE SECURITY OF THOSE INSTITUTIONS.

Please review this helpful information to aid in the successful processing of hard copy civil fingerprint submissions in order to prevent delays or rejections. Hard copy fingerprint submissions must meet specific criteria for processing by the Federal Bureau of Investigation.

Ensure all information is typed or legibly printed using blue or black ink.

Enter data within the boundaries of the designated field or block.

Complete all required fields. (If a required field is left blank, the fingerprint card may be immediately rejected without further processing.)

- The required fields for hard copy civil fingerprint cards are: ORI, Date of Birth, Place of Birth, NAM, Sex, Date Fingerprinted, Reason Fingerprinted, and proper completion of fingerprint impression boxes.

Do not use highlighters on fingerprint cards.

Do not enter data or labels within 'Leave Blank' areas.

Ensure fingerprint impressions are rolled completely from nail to nail.

Ensure fingerprint impressions are in the correct sequence.

Ensure notations are made for any missing fingerprint impression (i.e. amputation).

Do not use more than two tabs per fingerprint impression block.

Ensure no stray marks are within the fingerprint impression blocks.

Training aids can be ordered online via the Internet by accessing the FBI's website at fbi.gov, click on 'Fingerprints', then click on

'Ordering Fingerprint Cards & Training Aids'. Direct questions to the Biometric Services Section's Customer Service Group at (304) 625-5390 or by e-mail at identity@fbi.gov.

Social Security Account Number (SSAN): Pursuant to the Privacy Act of 1974, any Federal, state, or local government agency that requests an individual to disclose his or her SSAN, is responsible for informing the person whether disclosure is mandatory or voluntary, by what statutory or other authority the SSAN is solicited, and what uses will be made of it. In this instance, the SSAN is solicited pursuant to 28 U.S.C. 534 and will be used as a unique identifier to confirm your identity because many people have the same name and date of birth. Disclosure of your SSAN is voluntary; however, failure to disclose your SSAN may affect completion or approval of your application.

PRIVACY ACT STATEMENT

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprint and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprints repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

PAPERWORK REDUCTION ACT NOTICE

According to the Paperwork Reduction Act of 1995, no persons are required to provide the information requested unless a valid OMB control number is displayed. The valid OMB control number for this information collected is 1110-0046. The time required to complete this information collected is estimated to be 10 minutes, including time reviewing instructions, gathering, completing, reviewing and submitting the information collection. If you have any comments concerning the accuracy of this time estimate or suggestions for reducing this burden, please send to: Department Clearance Officer, United States Department of Justice, Justice Management Division, Policy and Planning Staff, Washington, DC 20530.

INSTRUCTIONS:

1. PRINTS MUST GENERALLY BE CHECKED THROUGH THE APPROPRIATE STATE IDENTIFICATION BUREAU, AND ONLY THOSE FINGERPRINTS FOR WHICH NO DISQUALIFYING RECORD HAS BEEN FOUND LOCALLY SHOULD BE SUBMITTED FOR FBI SEARCH.
2. IDENTITY OF PRIVATE CONTRACTORS SHOULD BE SHOWN IN SPACE 'EMPLOYER AND ADDRESS'. THE CONTRIBUTOR IS THE NAME OF THE AGENCY SUBMITTING THE FINGERPRINT CARD TO THE FBI. UNIVERSAL CONTROL NUMBER, IF KNOWN, SHOULD ALWAYS BE FURNISHED IN THE APPROPRIATE SPACE.
3. MISCELLANEOUS NO. - RECORD OTHER ARMED FORCES NO. PASSPORT NO. (PP) ALIEN REGISTRATION NO. (AR) PORT SECURITY CARD NO. (PS) SELECTIVE SERVICE NO. (SS) VETERANS ADMINISTRATION CLAIM NO. (VA)