



Fingerprints Form

Part A: Personal Information

A1. Full surname, as per passport <input type="text"/>	A2. Full first and middle names, as per passport <input type="text"/>
A3. Place and country of birth <input type="text"/>	A4. Date of birth (DD/MM/YYYY) <input type="text"/>
A5. Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	A6. Passport number <input type="text"/>
A7. Passport issued by <input type="text"/>	A8. Passport expiry date <input type="text"/>

A9. Fingerprints					
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	



Part B: Details of Person Authorised To Take Fingerprints

B1. Full name

B2. Organization

B3. Position

B4. Address

B5. License number or certification (if applicable)

B6. Telephone number

B7. Fax number

Examiner Certificate

I hereby certify that I have examined identification documents sufficient to satisfy myself of the identity of the applicant.

Examiner signature and stamp:

Place

Date