

**CRIMINAL BACKGROUND CHECK** - To be completed by out-of-state applicants. NC residents are encouraged to use the LiveScan application form.

### Instructions for Completing the Applicant Fingerprint Card

Please go to your local law enforcement agency (police department or sheriff's office) and request that they make two fingerprint cards. The bearer of this letter is seeking to obtain a copy of his or her criminal history record information for pursuant to NCGS 90-345(b) in order to obtain a license from the North Carolina Board of Licensed Professional Counselors.

1. The complete name of the subject is to be listed as indicated: last name, first name, and middle name. Please ensure the name is legible if written.
2. List any and all alias names or nicknames, maiden name, or any other married names.
3. Sex is to be listed as **M** for Male and **F** for Female or **U** for Unknown.
4. Race is to be listed by placing an individual into one (1) of the following categories by writing the appropriate letter in the space provided.
  - W – White
  - B – Black
  - I – American Indian or Alaskan Native
  - A – Asian or Pacific Islander
  - U – Unknown if unsure or unable to determine
5. Indicate the subject's height in feet and inches using all numeric.  
Example: 6'01" = 601, 6'11" = 611, 6' = 600
6. Indicate the subject's weight in pounds using all numeric.  
Example: 186 or 098, etc.
7. List the subject's eye color by placing one (1) of the following eye color codes in the space provided:
  - BLK—Black      GRY—Gray      MAR—Maroon
  - BLU—Blue      GRN—Green      PNK—Pink
  - BRO—Brown      HAZ—Hazel      XXX—Unknown
8. Color of hair should be indicated by writing one (1) of the following color codes in the space provided:
  - BAL – Bald (when subject has lost most of his hair or is hairless)
  - BLK – Black
  - BLN – Blond or Strawberry
  - BRO – Brown
  - GRY – Gray or partially
  - RED – Red or Auburn
  - SDY – Sandy
9. List the date of birth numerically– month, day and year  
Example: May 11, 1948 should be shown as 05111948
10. Indicate, if possible, the city and state where the subject was born. The state should be indicated by the two letter abbreviation.
11. OCA block: NCBLPC000
12. Social Security: write in the Social Security Number
13. Residence of Person Fingerprinted: Current residence of subject fingerprinted is written here.
14. Employer Board Address: NC Board of Licensed Professional Counselors, PO Box 77819, Greensboro NC 27417
15. Reason Fingerprinted: Licensed Professional Counselor per NCGS 90-345, state and federal.

