

ATN _____

SID# _____

<p>APPLICANT PROCESSING – DISCLOSURE BUREAU OF CRIMINAL IDENTIFICATION AND INFORMATION P.O. BOX 66614 (MAIL SLIP A-6) BATON ROUGE, LA 70896</p>
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LA LPC Board of Examiners
AGENCY, BUSINESS OR INDIVIDUAL NAME

11410 Lake Sherwood Ave. North, Ste. A
MAILING ADDRESS

<u>Baton Rouge</u>	<u>LA</u>	<u>70816</u>
CITY	STATE	ZIP CODE

<p>NOTICE: PLEASE PRINT OR TYPE INFORMATION, EXCLUDING ADMINISTRATORS OR AUTHORIZED PERSONS SIGNATURE.</p> <p>INCOMPLETE FORMS WILL NOT BE PROCESSED.</p>

<u>NAME OF APPLICANT</u>	<u>DATE OF BIRTH</u>	<u>PLACE OF BIRTH</u> (STATE)	<u>RACE / SEX</u>
<u>WEIGHT</u>	<u>HEIGHT</u>	<u>HAIR COLOR</u>	<u>EYE COLOR</u>
<u>SOCIAL SECURITY NUMBER</u>			

ALL INFORMATION RELEASED MUST REMAIN STRICTLY CONFIDENTIAL AND ONLY THOSE AUTHORIZED BY LAW TO RECEIVE THIS INFORMATION MAY SUBMIT A REQUEST.
DO NOT WRITE BELOW THIS LINE: {For Bureau of Criminal Identification and Information Use Only}

NOTICE: The response to your request for a criminal history check is based on a review of the State of Louisiana’s criminal history records database as is available at the time of request. This does not preclude the possible existence of an arrest or conviction information not available in our database.

CRIMINAL HISTORY DETERMINATION

- RAPSHEET ATTACHED
- RESPONSE BELOW