



State and National Criminal History Background Checks
Fingerprint Card Instructions
(See Example on Reverse Side)

1. **Do NOT complete fingerprint cards prior to being fingerprinted.** Upon arriving at an authorized fingerprinting agency you will be instructed on how to proceed. Some offices offer digital fingerprinting then the descriptor information is taken from your driver's license.
2. Print legibly in black or blue ink or type when entering the descriptor information on the cards.
3. Do not fold, staple, bend, tape or modify the fingerprint cards.
4. Use only the fingerprint cards that you receive from the Board of Nursing.
5. Fingerprint impressions **MUST** be obtained through an authorized technician. Contact your local sheriff's office or police department to set up an appointment to have your fingerprints taken (a fee may be charged for this service).
6. Fingerprints must be rolled carefully and legibly in all of the appropriate boxes.
7. Electronic scanning of fingerprints to the fingerprint cards by an authorized fingerprint technician is accepted. Electronic submission from the fingerprinting agency to the Board of Nursing is **NOT** available.
8. Send both of the completed fingerprint cards and the signed waiver to the Iowa Board of Nursing at the address above.

Completing the WAIVER

1. Sign and complete all information as indicated on the waiver.
2. By signing the waiver, the Board is entitled to access all criminal history convictions, including those with deferred judgements or expunged records. This includes all misdemeanors and operating while intoxicated convictions.
3. Not all criminal offenses will preclude the Board from issuing a license. However, failure to disclose relevant information may result in the denial of licensure or disciplinary action against the license if already issued.

PLEASE NOTE: The Board will not issue your license until the completed fingerprint cards and waiver are received.

The following information **outlined in red** is required to be entered on the fingerprint cards. Please use the following descriptor codes when completing the fingerprint cards.

Sex	Race	Eyes	Hair
M = Male	W = White, including Hispanic	BLK = Black	BLK = Black
F = Female	B = Black	BLU = Blue	BLN = Blonde
	I = Indian	BRO = Brown	BRO = Brown
	A = Asian	GRN = Green	GRY = Grey
	U = Unknown	HAZ = Hazel	RED = Red
			SDY = Sandy
			BLD = Bald

APPLICANT <small>* use privacy act notice on back</small>		LEAVE BLANK			TYPE OR PRINT ALL INFORMATION IN BLACK			FBI		LEAVE BLANK														
FD-258 (Rev. 5-15-17) 1110-0048		LAST NAME: NAM		FIRST NAME:		MIDDLE NAME:																		
SIGNATURE OF PERSON FINGERPRINTED		ALIASES: AKA		O R I						DATE OF BIRTH: DOB Month Day Year														
RESIDENCE OF PERSON FINGERPRINTED										PLACE OF BIRTH: POB														
DATE:	SIGNATURE OF OFFICIAL TAKING FINGERPRINTS		CITIZENSHIP: CTZ		SEX:	RACE:	HGT:	WGT:	EYES:	HAIR:														
EMPLOYER AND ADDRESS		YOUR NO.: OCA		UNIVERSAL CONTROL NO.: UCN		ARMED FORCES NO.: MNU		SOCIAL SECURITY NO.: SOC		MISCELLANEOUS NO.: MNU														
REASON FINGERPRINTED										CLASS: _____														
										REC: _____														
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										