



POLICE DEPARTMENT

Insert Copy of ID Here

Incident # _____

Date _____

Time _____

Last Name _____ First Name _____

Middle Name _____ Date of Birth _____

Social Security # _____ Driver Lic # _____ State _____

Current Address _____

City, State Zip _____

Phone # _____ Alternate Phone # _____

Agency/Firm Requesting Fingerprints _____

Signature _____

Please Note:

Fingerprinting services will be provided Monday through Friday from 9am-4pm).

- Valid, State issued ID or passport is required
- Fee is \$10.00 for 1 or 2 cards and is payable by cash only. **Exact amount required.**



POLICE DEPARTMENT

Fingerprinting COVID-19 Pre-Screening

Name _____ DOB _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Incident# _____

Travel History

1. In the past 14 days, have you traveled outside of Oklahoma? _____ Yes _____ No
When _____ Where _____

Contact History

2. Have you or anyone you've been in contact with had a laboratory confirmed positive COVID-19 test? _____ Yes _____ No
3. Do you currently have a fever, cough, shortness of breath, or other symptoms of lower respiratory illness? _____ Yes _____ No

Temperature at time of fingerprinting: _____ °F

Additional Information :

*If you currently have symptoms (fever, cough, shortness of breath, or difficulty breathing) you will not be approved to receive fingerprinting services from the Yukon PD.

*In order to receive fingerprinting services, you will be required to wear a face covering as approved by the CDC before entering the police department and during the finger printing process. You will also be required to wash your hands with soap and water prior and after fingerprinting.

Requester Name and Signature _____ Date & Time _____

Reviewer Name and ID # _____ Date & Time _____