

Request for Consent to Fingerprint a Minor

I hereby consent to the fingerprinting of _____ in
(Minor's Full Name)

connection with services to be performed for the _____.
(Court or Office)

Print or Type Name of Parent or Guardian

Signature of Parent or Guardian

Date

SUBMIT A COMPLETED COPY OF THIS FORM WITH THE PER 110 AND FD 258 FORMS TO:

Administrative Office of the U.S. Courts
Court Personnel Management Division
Personnel Security Group, Room 5-560
Thurgood Marshall Federal Judiciary Building
One Columbus Circle, N.E.

Mail: Washington, DC 20544

FedEx or UPS: Washington, DC 20002