



Do not fold. Post unfolded.

LEFT HAND

PLAIN PRINTS

RIGHT HAND

LEFT THUMB

RIGHT THUMB

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### FINGERPRINT CLASSIFICATION

Original Application No.	
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SURNAME AND INITIALS: .....

IDENTITY No.: .....

FINGERPRINTS TAKEN BY: .....

	Male	Female
Gender*	<b>M</b>	<b>F</b>

\*Mark with an X

#### CLASSIFICATION:

When a finger is missing, deformed, or so injured that the impression cannot be taken, this fact should be noted in the space provided for that impression.

RIGHT THUMB	RIGHT INDEX	RIGHT MIDDLE	RIGHT RING	RIGHT SMALL
LEFT THUMB	LEFT INDEX	LEFT MIDDLE	LEFT RING	LEFT SMALL

I declare that the information furnished by me herein is true and correct.

I the father/mother/guardian of this minor, declare that the information furnished herein, is to the of my knowledge and belief true and correct in all respects.

.....  
Signature or left thumb print of applicant

.....  
Signature or left thumb print of father/mother/guardian.  
If applicant is under 18 years.