



KENTON COUNTY AIRPORT BOARD

CVG FINGERPRINT APPLICATION

Applicant Information:

Last Name: _____ First Name: _____ Middle Name: _____

Company: _____

Birth Date: _____ SS# _____

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____ Sex: **M** or **F** (Circle One)

Home Address: _____ City: _____

State: _____ Zip: _____ Phone: () _____

Country of Birth: _____ State/Province/Region of Birth: _____

If not a U.S Citizen, you must provide us with current Employment Authorization paperwork.

Alien Registration # _____ Non-Immigrant Visa # _____

The information that I have provided is true, complete and correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement on this application can be punished by fine or imprisonment of both. (See Section 1001 of Title 18 United States Code).

Applicant Signature: _____ Date: _____

As an authorized representative of the Tenant identified above, I confirm that the Applicant identified above is an employee, prospective employee or employee of a contractor of the Tenant identified above. I further confirm the need for the Applicant to have a fingerprint-based criminal history record check for the purpose of determining qualification for unescorted access to the Security Identification Display Area (SIDA) and/or terminal sterile area. I understand that making knowing and willful false statements on this application is a punishable offense.

Authorized Signer's Printed Name: _____ Authorized Signer's Signature: _____

Date: _____

Fingerprints taken by: _____ Date: _____