

**OKLAHOMA DEPARTMENT OF CORRECTIONS  
REQUEST FOR RECORD**

Please furnish information as indicated concerning the below-described person.

**PLEASE RESPOND TO:** Attention: \_\_\_\_\_  
Requesting Employee Name  
\_\_\_\_\_  
Facility Name  
\_\_\_\_\_  
Facility Mailing Address

\*\*\*\*\* **THIS FORM MUST BE FILLED OUT IN ITS ENTIRETY** \*\*\*\*\*

NAME: \_\_\_\_\_  
Last Name First Name Middle Name

Alias(es)/any other names by which subject is known  
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**Please indicate Need for Request (Check One):**

\_\_\_ Volunteer/ \_\_\_ Intern/ \_\_\_ Employee Background; position being applied for: \_\_\_\_\_  
\_\_\_ CLEET Certification \_\_\_ Visitor Check; Offender/inmate name & DOC #:  
\_\_\_\_\_

\_\_\_ Offender/inmate: \_\_\_ Parole/ \_\_\_ Sex Offender/ \_\_\_ PSI/ \_\_\_ Early Term/ \_\_\_ New Case/  
\_\_\_ Delayed Sen./ \_\_\_ Absconder/ \_\_\_ Other,  
explain: \_\_\_\_\_  
\*\*\*\*\*

Address: \_\_\_\_\_  
Street/Rural Route/Box # City State Zip Code

DOB GENDER RACE EYE COLOR HAIR HEIGHT WEIGHT

\_\_\_\_\_ SOCIAL SECURITY NO. DRIVER LICENSE NO

\_\_\_\_\_ FBI NO. OSBI NO.  
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**Please check only ONE item per request:**

\_\_\_ FBI Record Transcript \_\_\_ Out of State Criminal History—State: \_\_\_\_\_  
\_\_\_ OSBI Record Transcript \_\_\_ Out of State Driver's License—State: \_\_\_\_\_  
\_\_\_ Department of Public Safety Record \_\_\_ Other Information Needed \_\_\_\_\_  
\_\_\_ NCIC - Wanted \_\_\_\_\_  
\_\_\_\_\_

I certify that the information applied for is necessary in the interest of the due administration of the laws and not for the purpose of assisting a private citizen or for personal use.

\_\_\_\_\_ Date Signature

ORI No. \_\_\_\_\_