



Andy Beshear
Governor

KENTUCKY STATE POLICE
919 Versailles Road
Frankfort, Kentucky 40601
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Keith Jackson
Secretary

Col. Phillip Burnett, Jr.
Commissioner

USER ACCOUNT REQUEST

DATE

AGENCY NAME _____ ORI: _____

TELEPHONE: _____ FAX: _____

TERMINAL AGENCY CONTACT (TAC): _____
(TAC is the point of contact for adding and removing names from agency)

T.A.C. EMAIL ADDR: _____ @ _____

- Please complete form below with Full Name, DOB, Last Four Social, Currently certified or not and User Type
- Indicate with a check mark the individual has submitted Fingerprints.

****ACCOUNTS WILL NOT BE CREATED IF UNABLE TO VERIFY FINGERPRINT SUBMISSION****

NAME <i>(shall include middle initial)</i> <i>Example: Smith, John M</i>	DATE OF BIRTH mm/dd/yyyy	LAST FOUR SOCIAL	CJIS CERT YES/NO	PART TIME CHECK IF APPLY	Access Full=F Inquiry Mobile=I	Fingerprints	

SIGNATURE OF AGENCY HEAD or DESIGNEE FOR AGENCY

Return Form To: erin.oliver@ky.gov

****Ensure a Criminal history has been completed before submission of this form.****