

APPLICANT

CRO 21B

THESE PARTICULARS TO BE ENTERED BY THE OFFICIAL TAKING THE IMPRESSIONS.

FEMALE

NAME

RACE NIGERIAN

This Form must be completed in every detail before the Official concerned begins to take the finger-prints of any other person. On no account must two incomplete Forms be dealt with at the same time.

FOR USE IN THE FINGER-PRINT SECTION

M.No		C.R.O. No.	
CLASSIFIED		DATE	
SEARCHED		DATE	
TESTED		DATE	

RIGHT HAND

1.—Right Thumb	2.—R. Forefinger	3.—R. Middle Finger	4.—R. Ring Finger	5.—R. Little Finger
				(Fold)

Impressions to be so taken that the flexure of the last joint shall be immediately above the black line marked (Fold). If the Impression of any digit be defective a second print may be taken in the vacant space above it.

When a finger is missing or so injured that the impression cannot be obtained, or so deformed and yields a bad print, the fact should be noted under *Remarks*.

LEFT HAND

6.—L. Thumb	7.—L. Forefinger	8.—L. Middle Finger	9.—L. Ring Finger	10.—L. Little Finger
				(Fold)

LEFT HAND
Plain impressions of the four fingers taken simultaneously

RIGHT HAND
Plain impressions of the four fingers taken simultaneously

LEFT HAND			RIGHT HAND		
Plain impressions of the four fingers taken simultaneously			Plain impressions of the four fingers taken simultaneously		
		Left Thumb	Right Thumb		
(Fold)					(Fold)
Impressions taken by	Rank	Date	Station		

NAME [REDACTED]

ADDRESS [REDACTED]

TRIBE KDO

PLACE OF BIRTH BEMIN CITY

YEAR OF BIRTH [REDACTED]

The information and finger-prints entered and this record are voluntarily submitted by the undersigned as a statement of fact and qualifications for the position/licence/permit applied for and/or hired for. The undersigned expressly authorises the Employer/Licensing Officer/Permit Officer to submit the said information and finger-prints to any person; firm, corporation, body bureau department, Police Officials and Police Record Bureau, whatsoever or whomsoever, for the purpose of any investigation whatsoever which the Employer/Licensing Officer/Permit Officer may desire, to make with reference thereto. And the undersigned does remise, release and forever discharge the Employer/Licensing Officer/Permit Officer, its successors and assigns of and from all manner of action and actions, suits, either in law or in equity, which against the Employer/Licensing Officer/Permit Officer the undersigned ever had, now has or which the undersigned, his heirs, executor and Administrators hereafter can, shall or may have for upon or by reason of any matters causes or things whatsoever in connection with the foregoing.



REASON FOR INQUIRY SPAIN

APPLICANT'S SIGNATURE [REDACTED]

REGISTRAR OF CRIMINALS,
NIGERIA

REPORT OF TERMINATION OF SERVICE

Date of Engagement	Class or Grade on Engagement	Date of Discharge			Class or Grade on Discharge	Reasons for Discharge
						<p style="text-align: right;">_____ Signature</p>