

Sex/Kidnap Offender Registration

Davis County Sheriff's Office			
Name:		Registration Number:	
Place of Birth:		Alt Registration #:	
Date of Birth:		SSN:	
Age:		FBI:	
DL # and State:		DOC:	
State ID #:		NCIC:	
Nationality:		Religion:	
Marital Status:			
PHYSICAL DESCRIPTION:			
Gender:		Eye Color:	
Build:		Wears Glasses:	
Height:		Hair Color:	
Weight:		Hair Length:	
Race:		Facial Hair:	
Ethnicity:		Handedness:	
Skin Tone:			
Gang affiliation:		Gang name:	
SCARS, MARKS AND TATOOS:			
MEDICAL INFORMATION:			
Blood Type:			
ALIAS:			
Alias Name (s):			
Alias SSN (s):			
ADDRESSES:			
Home Address:			
Date of move to new home address:			
Telephone Numbers:		Home:	Mobile:
EMPLOYMENT:			
Business name and address:		Supervisor Name & Telephone Number:	Date Employed:
PROFESSIONAL LICENSES:			
License Date:	Authority:	Number:	Description:
SCHOOL:			
School Name:	Address:	Telephone Number:	
VOLUNTEER:			
Organization:	Address:	Telephone:	

VEHICLES:			
Make:	Model:	Color:	Year:
License Plate #:	State:	VIN#:	
Make:	Model:	Color:	Year:
License Plate #:	State:	VIN#:	
Make:	Model:	Color:	Year:
License Plate #:	State:	VIN#:	
Make:	Model:	Color:	Year:
License Plate #:	State:	VIN#:	
OFFENSES:			
City of Offense:	County of Offense:	State of Offense:	
Conviction Date:			
PROBATION:			
Probation Officer:		Telephone Number:	
INTERNET:			
Type:	User Name:	Web Address:	
Type:	User Name:	Web Address:	
Type:	User Name:	Web Address:	
Type:	User Name:	Web Address:	
Type:	User Name:	Web Address:	
Additional Information:			

