

REQUEST FOR FINGERPRINTING AND/OR SAFE HAVEN RECORDS

Please use this form if you have been fingerprinted at your daughter's Diocesan elementary school after April 25, 2000 or if you have submitted your certificate of completion of the Safe Haven course within the last four years.

Records requested:	Fingerpr	inting Safe Have	n	
Student's Name:	Last	First	SFHS Class of	(please print)
Mother's Name:				(please print)
	Last	First	MI	
Father's Name:	Last	First	MI	(please print)
Diocesan elementar course:	y school where applic	cant was fingerprinted and,	/or completed the S	afe Haven
		Name of School		
Mother's signature		Fat	Father's signature	

Please return this form to the Office of the St. Francis High School Dean of Students