



**BACKGROUND CHECK AUTHORIZATION FORM - LDAF**

Louisiana State Police  
Bureau of Criminal Identification and Information  
P.O. Box 66614 (Mail Slip A-6)  
Baton Rouge, LA 70896

Acceptable forms of payment include: Cashier Check, Business Check with pre-printed business name or Money Order  
Credit Card payments are accepted when paying in person at Louisiana State Police Headquarters

**\*\*FORMS MUST BE FILLED OUT IN INK AND BE REVIEWED BY SUBMITTING AGENCY/INDIVIDUAL FOR ACCURACY\*\***  
**\*\*\*\*FINGERPRINTS ARE NECESSARY FOR A POSITIVE IDENTIFICATION\*\*\*\***

\*\*\*\*PLEASE PRINT\*\*\*\*

Louisiana Department of Agriculture & Forestry

Lester Cannon

AGENCY, FACILITY OR INDIVIDUAL

AGENCY, FACILITY AUTHORIZED REPRESENTATIVE OR INDIVIDUAL

5825 Florida Blvd., Suite 3004

MAILING ADDRESS

SIGNATURE OF AUTHORIZED REPRESENTATIVE/INDIVIDUAL

Baton Rouge LA 70806

( 225 ) 952-8062

CITY

STATE

ZIP CODE

AGENCY, FACILITY OR INDIVIDUAL PHONE NUMBER

AGENCY OR FACILITY E-MAIL ADDRESS

Request For: (pick one only)

MEDICAL MARIJUANA PROGRAM

LA921084Z (MEDM) LRS 47:1047

INDUSTRIAL HEMP SEED PROGRAM

LA921098Z (HEMP) LRS 3:1465(D)

LIVESTOCK BRAND INSPECTOR

LA053015Y (LAW) LRS 3:734

APPLICANTS FULL NAME:

\*\*\*\*PRINT - USE INK\*\*\*\*

LAST

FIRST

MIDDLE

\*INCLUDE MAIDEN NAME & PREVIOUS MARRIED NAMES BELOW IF APPLICABLE:

\*LAST

FIRST

MIDDLE

\*LAST

FIRST

MIDDLE

APPLICANTS SOCIAL SECURITY #

DATE OF BIRTH: / /

RACE

SEX

DRIVERS LICENSE or ID #

STATE

POSITION or LICENSE APPLIED FOR

APPLICANTS SIGNATURE:

APPLICANTS PHONE NUMBER:

**AUTHORIZATION TO DISCLOSE CRIMINAL HISTORY RECORDS INFORMATION**

By my signature above, I hereby authorize the Louisiana State Police to release all pertinent criminal record information maintained in their files, other states files, or the FBI files (if applicable) which may confirm or deny my eligibility with the facility or agency named above. Pursuant to Title 28, C.F.R., Section 16.34, officials making the determination of suitability for licensing or employment shall provide the opportunity to complete, or challenge the accuracy of, the information contained in the FBI identification record.

**DPSSP 6696 (LDAF)**

Revised 3/8/2022