NEVADA JUVENILE SEX OFFENDER VERIFICATION/CHANGE FORM □ ADDRESS CHANGE □ EMPLOYMENT/OCCUPATION CHANGE □ LICENSE/VEHICLE CHANGE VERIFICATION: ☐ YEARLY ☐ 6 MONTH ☐ 90 DAY ☐ 30 DAY CHECK-IN ☐ FINGER/PALM PRINTS ☐ PHOTO PHOTOCOPIES: Drivers License DD Card Professional License DP Passport AGENCY INFORMATION OFFICIAL USE ONLY Agency Name: Agency Address: Fingerprint PCN # Agency Number: State Registration Number: Scope ID: Tier Level: PERSONAL INFORMATION Last Name: First Name : Middle Name: E-mail address: User Name: Screen Name: DOB: SS#: Place of Birth: City: State: WGT: Race: HGT: Hair: Eyes: Sex: ADDRESS INFORMATION ☐ CURRENT ☐ FUTURE ■ NON-FIXED Street Address/Location: City: State: Zip Code: County: Telephone#: Cell Phone: Start Date: End Date: ☐ Mailing Address: City: State: Zip Code: ☐ PREVIOUS ADDRESS INFORMATION **☐** SECONDARY ☐ FUTURE ■ NON-FIXED Street Address/Location: Zip Code: City: State: County: Telephone#: Cell Phone: Start Date: End Date: EMPLOYMENT/VOLUNTEER INFORMATION EMPLOYED ☐ UNEMPLOYED ☐ VOLUNTEER **Employer Name:** Street Address: City: State: Zip Code: Telephone #: **Business Type:** Occupation: **NEW SCARS - MARKS - TATTOOS** ☐Tattoo ☐Scar ☐Mark □ Verified Location: Description: □Tattoo □Scar □Mark □ Verified Location: Description:

1

Revised 10/24/2018

NEVADA JUVENILE SEX OFFENDER VERIFICATION/CHANGE FORM

	PROI	FESSI	ONAL LIC	CENSE INFORMA	NOITA			
Name on License:							License #	
License Type:					Issuinç	g State:	Expiration Date:	
	CURF	RENT	EDUCATI	ONAL INFORMA				
School Name:					School Typ	oe: 🗌 Hi	gh School Private	
			1			/Universit	y 🗌 Trade/technical	
Address:			City:		State:		Zip Code:	
Telephone#:		Start Date:			Er	nd Date:		
	DRIVER'S LICE	NSE/II	DENTIFIC	ATION/VEHICLE	INFORMA	ATION		
☐ Driver's License #			ation Date:	ATION, VEINOLE		f Issue:		
Silver & Liberiae #	_identification #	LAPII	anon bate.		State	. 10006.		
License Plate #:	.icense Plate #:					Reg. Expiration Date:		
Vehicle Identification	¥ (VIN)		1	Vehicle Year:			_	
venicle identification	r (VIIV)			venicle real.				
Vehicle Make:	Vehicle Make: Vehicle Model:			Vehicle Type:		Vehicle Color:		
Location vehicle is ke	pt:							
License Plate #:			State:			Reg. Expiration Date:		
Vehicle Identification	# (VIN):			Vehicle Year:				
Vehicle Make: Vehicle Model:			Vehicle Type:			Vehicle Color:		
Location vehicle is ke	pt:							
false or misleadin and charged with	cknowledge the abo g information to the a category D felony pursuant to NRS 1	e regis	stering au	uthority or failure lation within 7 ye	to sign the	nis form	I may be arrested	
Registrant's Signature		Parent/	Guardian Siç	gnature	Date			
Agency Representative S	Signature *Agency representa	ıtives' siar	nature is require	ed.				
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NEVADA JUVENILE SEX OFFENDER VERIFICATION/CHANGE FORM

gency Name:			Agency/Scope#:	State Initial Reg Date:		Tier Level:					
st Name:		First Name:	Middle Name:		Date of Birth	: Social Security					
	MY INITIALS ACK	NOWLEDGE THAT I HAVE	READ OR HAD READ TO	ME EACH P	ARAGRAPH						
nitial	Metropolitan Police Depar	n in the State of Nevada for a perment, or City Police Departmenns can result in my being arreste	t in whose jurisdiction I reside,	for ALL convic	ions defined in N	NRS 62F. Failure to					
nitial	police department, or city	vada and working or attending solice department in whose juristian institution of higher education 79D.460)	sdiction I am a student or work	er not later tha	in 48 hours after	becoming a student or					
Initial	I understand that if I am a resident of Nevada, and I am a student, working or carrying on a vocation in a state other than Nevada, I must personally appear to register with law enforcement in the state I am a student, employed, or carrying on a vocation. (NRS 179D.450,)										
Initial	to me or vehicles frequent jurisdiction outside this sta resided, of the change of a	tered address to another reside y driven by me I must report the te, I am required to notify in per ddress. Failure to notify the loca 79D.447, 179D.450, 179D.460, 2	e change in person to the local son or in writing, the local law I law enforcement agency of th	aw enforceme enforcement a	nt agency. If I mo	ove to another sdiction where I former					
Initial		another jurisdiction, it is my restories, District of Columbia, and	·		w enforcement a	gency in that jurisdiction					
nitial	offender resides if there ar	no fixed residence shall at least e e any changes in the address of ender habitually sleeps. (NRS 179	any dwelling that is providing t			•					
nitial	agency in my residence jur	the United States for employme isdiction of the intended travel a 23(b)), 73 FR at 38066-67, 34 U.S	it least 21 days in advance. (NR	S 62F.300, 179	D.151, 179D.450						
Initial	travel I am required to not enforcement agency where	ner than my residence for seven fy the local law enforcement ag e I will be lodging domestically o 38066, 76 FED.REG.page 1637 (J	ency in my residence jurisdiction r internationally of my presenc	n of my travel	plans and notify	the local law					
Initial	complete and sign a verific and a photo. If I am design	establishing a record of registra ation of registration form. I mus ated a Tier 1, I must appear not if I am designated a Tier 3, I mu	t allow the law enforcement ag less frequently than annually, i	ency to collect f I am designat	a current set of ed a Tier 2, I mu	fingerprints, palm print st appear not less					
	if I fail to comply wi registration authori with a category D fe	nowledge that I have that these requirements ty, or fail to initial and elony, a second violatiursuant to NRS 179D.	s, provide false or mis sign this form I may <mark>on within 7 years I m</mark> a	leading in be arreste ay be char	formation to d and charg	o the					
Registrant's Sigr	nature	Parent/Guardiar	n Signature	Date							
Agancy Panrasa	entative Signature			 Date							

3

Revised 10/24/2018