

## To Use Stanford University Department of Public Safety Forms

Please print the necessary form, complete all requested information and add any supporting documentation. Return it to Stanford University Department of Public Safety.

It may be returned:

By U.S. Mail to: Stanford University  
Department of Public Safety  
Records Unit  
711 Serra Street  
Stanford, CA 94305-7240  
*(Please allow time for mail delivery)*

By Campus ID Mail to: Public Safety  
Mail Code 7240  
*(Please allow time for mail delivery)*

By Fax to: 650-725-8485

or By delivery in person: Public Safety Building  
711 Serra Street  
Stanford, CA 94305-7240

***If you have any questions call  
the SUDPS Records Unit at 650-723-9633.***



# Stanford University Department of Public Safety

711 Serra Street  
Stanford, CA 94305-7240  
650-723-9633

## POLICE CLEARANCE APPLICATION

*Allow five (5) Working days to process this request*

Print ALL Information

Applicant:	Driv. Lic / State:
Birth Date:	Soc. Sec. #:

Sex:	Height:	Weight:	Hair:	Eyes:
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Affiliation: <i>Check One</i>	Faculty - <b>G</b>	Staff - <b>G</b>	Student - <b>G</b>	Spouse - <b>G</b>
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### Stanford Residence Addresses:

*(Not Post Office Boxes)*

### Residence Dates:

To: From:

1		
2		
3		
4		

Return by: *Check One*:

Will Call - <b>G</b>	Mail - <b>G</b>
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Number of Copies Needed:
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### Mailing Address: *(If Needed)*

### Local Telephone #:

Name / Street / Apt.	( ) -
City/State/ZIP	

**DECLARATION OF APPLICANT:** *I hereby certify that there are no willful misrepresentations, omissions or falsifications in the foregoing statements and answers to questions.*

Signature of Applicant:	Date:	Time:
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*Before this form will be processed, positive identification must be provided.*

*If you are mailing or faxing this request to SUDPS you must also send a copy of a governmental issued photographic identification card.*

Identification Provided:	Number:	Ca DL <b>G</b>	Passport <b>G</b>	Student ID <b>G</b>	Other <b>G</b> _____
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Received By:	ID#:
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<b>Results of Records Check:</b>
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Checks Completed	SR Log:	MNI:	Other:
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Completed by:	ID#	Date	Time
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