

# State of Indiana

Note: Any incomplete forms will be returned as all the information requested below is **required**.

## Name

Legal First Name: \_\_\_\_\_

Legal Middle  
Name or Initial or  
N/A if no middle  
name:

\_\_\_\_\_

Legal Last Name: \_\_\_\_\_

Suffix: \_\_\_\_\_

Has applicant ever  
used any other  
name including  
different first,  
middle, or last  
name or  
combination of  
names?:

\_\_\_\_\_

**Examples of  
alternate names  
could be any of  
these:**

**A nickname, a name prior to adoption, a maiden name, a name from a  
previous marriage, or a different name due to a name change**

\_\_\_\_\_

## Demographic Information

Social Security  
Number:

\_\_\_\_\_

Gender at  
Birth:

\_\_\_\_\_

Has your  
gender identity  
changed since  
birth?:

\_\_\_\_\_

Race:

\_\_\_\_\_

**Contact Information**

Phone number: \_\_\_\_\_

Email address: \_\_\_\_\_

**Applicant Current Residential Address**

Street Address: \_\_\_\_\_

City, State and  
Zip code: \_\_\_\_\_

County and  
Country: \_\_\_\_\_

**Address Information**

The applicant is required to enter current residential address and all required fields for previous addresses dating back to January 1, 1988 or 'Date of Birth', whichever is most recent.

Example 1: Date of birth is 06/05/2000. Required addresses back to 06/05/2000.

Example 2: Date of birth is 03/16/1963. Required addresses back to 01/01/1988.

Note: Addresses may not cross or overlap. Explain where necessary. Use additional pages as needed.

