



# ARIZONA BOARD OF FINGERPRINTING

## Central Registry Exception Reference Form

PO Box 6129 • Phoenix, Arizona 85005-6129  
Telephone (602) 265-0135 • Fax (602) 265-6240  
info@fingerprint.az.gov • <https://fingerprint.az.gov>

Do not write in this area

1. Letter of Reference for: \_\_\_\_\_
2. Written by: Name: \_\_\_\_\_  
Agency: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_
3. Are you the applicant's employer?  
 Yes       No
4. Are you aware that the Arizona Department of Economic Security has denied clearance for the individual requesting this letter because of a substantiated allegation of child abuse or neglect?  
 Yes       No
5. Has this individual informed you of the reason(s) for the denial?  
 Yes       No
6. How long have you been acquainted with this individual? Please indicate the number of:  
\_\_\_\_\_ Years      \_\_\_\_\_ Months
7. In what ways do you know this individual? (Please check only one.)  
 Personally       Professionally       Both
8. Would you recommend that this individual be granted a central-registry exception?  
 Yes       No
9. Please include any additional statements you would like regarding this individual, either below or on a separate sheet.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date