



ALABAMA LAW ENFORCEMENT AGENCY

Sex Offender Registration

CHECK ONE:

- ( ) New Registration
( ) Quarterly Registration
( ) Yearly Registration
( ) Address Change
( ) Employment Change
( ) School Change
( ) Temporary Address
( ) Homeless

Offender Information

Form section for Offender Information including fields for Full Name (Last, First, Middle, Suffix), Social Security Number, Birth Date, Place of Birth, Blood Type, Alternate SSN, Alternate DOB, Home/Cell Phone, Work Phone, Race, Gender, Hair Color, Eye Color, Height, Weight, Skin Tone, and Registration Status (Absconded, Unknown, Compliant, Non-compliant).

Form section for Nearest Relative including fields for Name, Relationship, and Phone Number.

Form section for Offender's Address including fields for Mailing Address, Street Address, City, County, State, Zip Code, Apartment #, Time at this residence, and Previous Address.

Form section for Checked for warrants and Outstanding warrants with Yes/No checkboxes.

Form section for FBI Number, SID Number, and AIS Number.

Form section for Any Cautions/Medical Conditions and Scars/Marks/Tattoos.

Employment / School Information including day labor, volunteer, unpaid internship, etc.

Form section for Occupation including Offender's Position or Job Title and Is this employment within 2,000 ft of a school or daycare? Yes/No checkboxes.

Form section for Employer including Name, Address, and Work Location (if different than employer address).

Form section for School including School Name and School Address.

### Other Identifying Information

Driver License/State ID numbers (include issuing State)
Passport, Military ID, Immigration ID, Professional Licenses, etc.
Professional Licenses (include type and number)
Internet Identifiers/Addresses (Email, Facebook, Twitter, etc.)
Internet Service Provider (e.g., Charter, AT&T, etc.)

### Offense Information

Offense (include code section if known) (attach additional sheets if necessary)				UCR Code
Offense Description				
Date of Arrest	State of Crime	City of Crime	Court Case #	Disposition Date
<b>Victim</b>	Age	Race/Gender	Relationship	
<b>Weapon</b>	Type	Make	Description	
<b>Court</b> <small>(Check one in each box)</small>	<b>Jurisdiction</b>	<b>Type</b>		<b>Status</b>
	<input type="checkbox"/> Alabama conviction <input type="checkbox"/> Out of State <input type="checkbox"/> Military <input type="checkbox"/> Federal	<input type="checkbox"/> Youthful Offender <input type="checkbox"/> Juvenile <input type="checkbox"/> Adult		<input type="checkbox"/> Probation <input type="checkbox"/> Parole <input type="checkbox"/> None
<b>DNA Available</b>				
<input type="checkbox"/> Yes <input type="checkbox"/> No				

### Vehicle Information including land, aircraft and watercraft vehicles

<b>Select:</b> <input type="checkbox"/> Personal <input type="checkbox"/> Work <input type="checkbox"/> Other _____					
Type	Make	Model	Style/Color	Tag # / State	Year
Vehicle Identification #	Address vehicle is kept		Plate Category	Plate Type	Year Expires
<b>Select:</b> <input type="checkbox"/> Personal <input type="checkbox"/> Work <input type="checkbox"/> Other _____					
Type	Make	Model	Style/Color	Tag # / State	Year
Vehicle Identification #	Address vehicle is kept		Plate Category	Plate Type	Year Expires

By signing below, I affirm that all the information I have given is true and correct and is in compliance with the Alabama Sex Offender Registration and Community Notification Act. Failure to accurately complete and return this form could result in a felony conviction.

Offender Signature \_\_\_\_\_ Date \_\_\_\_\_

Reporting Officer Signature \_\_\_\_\_ Date \_\_\_\_\_

### Responsible Agency

<b>Reporting Officer</b>	
<b>Agency Name</b>	
<b>Address</b>	
<b>Phone</b>	
<b>Contact Email</b>	

After verifying the offender information for accuracy and completeness, enter your agency identifying information and email or mail this form along with a current photograph and fingerprints of the offender to:

**ALEA Sex Offender Registration Unit**  
 P O Box 1511  
 Montgomery AL 36102-1511

[sexoffenderunit@alea.gov](mailto:sexoffenderunit@alea.gov)  
 Main (334) 353-1172  
 Fax (334) 353-2563