

A large green decorative shape on the left side of the slide, featuring a white rounded rectangular cutout. The text is positioned within this cutout.

IDs you can use to get

A Library Card

A thick, dark blue horizontal bar with rounded ends, positioned below the text.

Documents you can use for Identity verification

Florida Driver's License or Florida ID



Documents you can use for Identity verification

Student Identification



Documents you can use for Identity verification

Employee Identification



Documents you can use for Identity verification

Military Identification



Documents you can use for Identity verification

Passport or Visa



Additional documents you can use for Identity verification

- Immigration records
- Consulate-issued ID
- Online prison or arrest records

Documents you can use for Address verification

Permanent Voter Registration Card

The image shows a Permanent Voter Registration Card for Pinellas County, Florida. At the top, it features the signature of Deborah Clark, Supervisor of Elections, and the text "VOTER INFORMATION PINELLAS COUNTY, FLORIDA". The card is divided into several sections: "VOTER NAME AND ADDRESS" (John Q. Citizen), "PRECINCT" (170), "CITY/NON-CITY" (SP), "VOTER REGISTRATION #" (1101), "DATE OF BIRTH" (01/01/1980), "REGISTRATION DATE" (01/01/1998), and "SPECIAL DISTRICT" (SP 3). At the bottom, there are columns for "U.S. CONGRESS" (10), "FLORIDA SENATE" (16), "FLORIDA HOUSE" (52), "COUNTY COMMISSION" (6), "SCHOOL BOARD" (6), and "PARTY" (Up to 20+ Party choices).

VOTER NAME AND ADDRESS		PRECINCT			
John Q. Citizen		170			
		CITY/NON-CITY			
		SP			
VOTER REGISTRATION #	DATE OF BIRTH	REGISTRATION DATE	SPECIAL DISTRICT		
1101	01/01/1980	01/01/1998	SP 3		
U.S. CONGRESS	FLORIDA SENATE	FLORIDA HOUSE	COUNTY COMMISSION	SCHOOL BOARD	PARTY
10	16	52	6	6	Up to 20+ Party choices.



Documents you can use for Address verification

Property tax notice or receipt



Additional documents you can use for Address verification

- Automobile registration
- First class mail postmarked within the last 30 days
- Lease or rental agreement or current month's rent receipt
- Current utility bill
- Proper identification from a member of the applicant's household who is present and lives at the same address.

Documents you can use for Identity verification for a Juvenile card

Birth Certificate

STATE OF HAWAII		CERTIFICATE OF LIVE BIRTH		DEPARTMENT OF HEALTH	
		FILE NUMBER 151		61 10641	
1a. Child's First Name (Type or print)		1b. MIDDLE Name		1c. Last Name	
BARACK		HUSSEIN		OBAMA, II	
2. Sex	3. This Birth	4. If Twin or Triplet, Was Child Born	5a. Birth Date	5b. Month	5c. Day
Male	Single <input checked="" type="checkbox"/> Twin <input type="checkbox"/> Triplet <input type="checkbox"/>	1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/>	August	4	1961
6a. Place of Birth: City, Town or Rural Location			6b. Island		
Honolulu			Oahu		
6c. Name of Hospital or Institution (If not in hospital or institution, give street address)			6d. In Place of Birth Inside City or Town Limits? If no, give judicial district		
Kapiolani Maternity & Gynecological Hospital			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
7a. Usual Residence of Mother: City, Town or Rural Location		7b. Island		7c. County and State or Foreign Country	
Honolulu		Oahu		Honolulu, Hawaii	
7d. Street Address			7e. In Residence Inside City or Town Limits? If no, give judicial district		
6085 Kalaniana'ole Highway			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
7f. Mother's Mailing Address			7g. In Residence on a Farm or Plantation?		
			Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
8. Full Name of Father		9. Race of Father		10. Age of Father	
BARACK HUSSEIN OBAMA		African		25	
11. Birthplace (State, town or Foreign Country)		12a. Usual Occupation		12b. Kind of Business or Industry	
Kenya, East Africa		Student		University	
13. Full Maiden Name of Mother		14. Race of Mother		15. Age of Mother	
STANLEY ANN DUNHAM		Caucasian		18	
16. Birthplace (State, town or Foreign Country)		17a. Type of Occupation Outside Home During Pregnancy		17b. Date Last Worked	
Wichita, Kansas		None			
I certify that the above stated information is true and correct to the best of my knowledge.			18a. Signature of Family or Other Informant		18b. Date of Signature
			<i>Stanley Ann Dunham Obama</i>		8-7-61
I hereby certify that this child was born alive on the date and hour stated above.			19a. Signature of Registrar		19b. Date of Signature
			<i>David A. Simler</i>		8-8-61
20. Date Accepted by Local Reg.		21. Signature of Local Registrar		22. Date Accepted by Reg. General	
AUG - 15 1961		<i>W. Lee</i>		N.C. - 5 1961	
23. Evidence for Delayed Filing or Alteration					

Documents you can use for Identity verification for a Juvenile card

Social Security Card



Documents you can use for Identity verification for a Juvenile card

Immunization Record

Vaccine <small>(circle specific type given)</small>	Date Given	Doctor or Clinic	Date Next Due
1 Hep B			
2 Hep B			
3 Hep B			
1 Hep A			
2 Hep A			
Other			
Other			
Other			
Other			
<small>Please fold on dotted line</small>			
1 Flu (TIV/LAV)			
2 Flu (TIV/LAV)			
Yearly Flu (TIV/LAV)			
Yearly Flu (TIV/LAV)			
Other			
Other			
Other			

All children ages 6 months through 8 years who receive Influenza vaccine for the first time should be given 2 doses. Children who receive only one dose in the first year of vaccination should receive two doses in their second year of vaccination.

Please fold on dotted line



Immunization Record

Name _____
(Last, First, MI)

Date of Birth _____

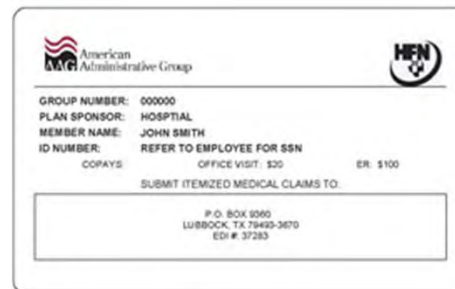
Physician or Clinic _____

Notice to Parents: Please take this card with you when you visit your doctor or clinic and have them fill in the information.



Documents you can use for Identity verification for a Juvenile card


Health Insurance Card



Documents you can use for Identity verification for a Juvenile card

School-issued record

High School Report Card Template



School Name

High School Report Card

Student's Report Card School Address
 Discipline of Student Phone Number
 Registration/Roll No. Fax
 Student's Address Email

This report card provides assessment of several measures of school's performance.

Courses	Status Score (2010-2011)	Adjusted Score (2010-2011)	Grade (2010-2011)
Subject #1			
Subject #2			
Subject #3			
Subject #4			
Subject #5			
Subject #6			
Subject #7			
Subject #8			
Achievement Sub-Total			
Indicators of School Performance			
Preliminary Grade			
AYP Status (Adequate Yearly Progress)			
Composite Grade			
Attendance			
Quarterly GPA			0.00
Semester GPA			0.00
Overall GPA			0.00

Teacher's Comments:

Teacher Signature: _____ Parent/Guardian Signature: _____
 HOD Signature: _____ Date: _____
 Date: _____

Message!!!
 Return this report after sign and discuss weakness of your child with his/her teacher. Have a Great Day!

A 100-95	S Satisfactory
B 94-85	N Needs Improvement
C 84-75	U Unsatisfactory
D 74-70	
F 69 or Below	

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