

Wisconsin Department of Safety & Professional Services

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NURSING HOME ADMINISTRATOR EXAMINING BOARD

REQUEST FOR CIB (CRIME INFORMATION BUREAU) INFORMATION

All persons applying for the nursing home administrator's examination are required to remit a \$8.00 fee to the department to cover the cost of a CIB (Crime Information Bureau) record check. This amount has been included in the application fee. Please return this letter along with your completed application.

Please provide the following information. Thank you for your assistance and cooperation.

Last Name: _____

First Name: _____

Middle (Optional): _____

Sex: _____ Male _____ Female

Race: _____

Date of Birth: _____

Birthplace (City/State): _____

Social Security Number: _____

Other Names: _____