RI-026 (06/2018)
Michigan State Police
Criminal Justice Information Center

AUTHORITY: MCL 28.242a;
COMPLIANCE: Voluntary, but highly recommended for expedited service.

REQUEST FOR AMENDMENT OF PUBLIC CRIMINAL HISTORY RECORD

Complete this form to request an amendment of a public Criminal History Record. Although this form is not required for a request for an amendment, the information obtained will expedite the request process.

Mail To
Michigan State Police
Criminal Justice Information Center
Attention: Record Challenge
P.O. Box 30634
Lansing, Michigan 48909-0634

Telephone
517-241-0606

Enclosures
- A completed Applicant and Personal Identification Card (RI-008)
- A copy of the record requested to be amended

Note: An RI-008 Applicant and Personal Identification Card can be obtained at any local law enforcement agency or Michigan State Police post. Always call ahead to obtain an agency's or post's fingerprinting schedule.

I. Requestor's Information

Full Name of Requestor (First, Middle, Last, Suffix)			Date of Birth
Street Address	City	State	ZIP Code
Driver's License State	Driver's License Number	Social Security Number	

II. Criminal History Record Information

State ID Number From Enclosed Criminal History Record	Federal Bureau of Investigation Number From Submitted Criminal History Record

Reason for Request for Amendment

III. Signatures

Requestor Signature	Date
Witness Signature	Date

This information is confidential. Disclosure of confidential information is protected by the Privacy Act of 1974 (5 U.S.C. § 552a), as amended.