

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF STATE POLICE
SEX OFFENDER AND CRIMES AGAINST MINORS RE-REGISTRATION AND
ADDRESS VERIFICATION FORM

IDENTIFICATION INFORMATION

NAME	SEX	RACE	REGISTRATION NUMBER
MAILING ADDRESS			
RESIDENCE ADDRESS			

FAILURE TO COMPLY WITH THE REGISTRATION REQUIRED IS PUNISHABLE AS PROVIDED IN
VIRGINIA CODE 18.2-472.1

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Please verify the information on this form, with your signature, thumbprints and date. This form must be received at the Department of State Police on or before _____ to be in compliance with your duty to re-register. Persons convicted of offenses requiring registration must do so in accordance with the provisions of Chapter 9 of Title 9.1 of the Code of Virginia.

FAILURE TO COMPLY WITH THE REGISTRATION REQUIRED IS PUNISHABLE AS PROVIDED IN VIRGINIA CODE 18.2-472.1

The accurate completion and timely submission of the address verification/re-registration fulfills your obligation of re-registering and verifying your address with State Police as required by law. I certify the information provided on this address verification/re-registration form is complete and accurate and am aware of my responsibilities to re-register with the State Police within three days of changing my address, employment, or owned vehicle registration information within Virginia. I must reregister within 3 days of changing my employment or owned vehicle registration information outside of Virginia or 10 days prior to moving outside of Virginia. I must register within 30 minutes if I change my electronic mail address information, my instant message, chat or other Internet communication name or identity information that I use or intend to use. This must be accomplished by reporting to the local law enforcement where my residence is located or where I previously registered my offender information. Additionally, anytime I report a change of information to the Sex Offender Registry, I am responsible for providing a photo identification issued by a governmental agency with my complete name and personal descriptive information, my place of employment information, my physical address of residence, any/all electronic mail address information, any/all instant message, chat or any/all other Internet communication name or identity information that I may use or intend to use, whether within or without the Commonwealth, and my vehicle registration information if I own any vehicle(s) to local law enforcement where my new residence is located. Pursuant to Section 9.1-904, I hereby consent to authorize any business or organization that offers electronic communications or remote computer services to provide to the Department of State Police any subscriber information pertaining to my electronic identity information provided to the Registry. Pursuant to the federal Sex Offender Registration and Notification Act, a registrant is required to provide their residence jurisdiction with travel document information including passport, immigration visa numbers, and if and when you travel or relocate out of state or country. You must also update the Department of State Police with a travel itinerary of any intended travel outside of the U.S. at **least 21 days** prior to that travel. **Failure to do so may result in federal prosecution.** Reporting travel does not authorize entry into your destination country; contact the local embassy of your destination country prior to your departure to determine whether entry will be authorized upon your arrival. Information you need to provide is found at: www.smart.gov/international_travel.htm Nonresidents of The Commonwealth of Virginia are required to fulfill their obligation to the law as it applies to residents of Virginia. I acknowledge that I am required to notify the Department of State Police at least 21 days in advance of any travel or relocation out of the country, and provide the information described above.

If I am classified as a Tier I or II offender, I am required to re-register once a year based on my birth month and last name. If I am classified as a Tier III offender or Murder offender, I am required to re-register four times a year for life based on my birth month and last name.

If I am classified as a Tier I or II and I am convicted of one count of 18.2-472.1 knowingly fail to register or re-register, I am required to re-register twice a year based on my last name for life. If I am classified as a Tier III or Murder and I am convicted of one count of 18.2-472.1 knowingly fail to register or re-register, I am required to re-register monthly based on my last name for life.

If my last name begins with the letters "A-L", my re-registration letter will be due between the 1st day of the month and the 15th of the month. If my last name begins with the letter "M-Z", my re-registration letter will be due between the 16th day of the month and the last day of the month.

CHANGES IN REGISTRATION INFORMATION ARE NOT ACCEPTED ON THIS FORM. FOR CHANGES IN INFORMATION, REPORT TO YOUR LOCAL LAW ENFORCEMENT AGENCY TO COMPLETE A NEW SP-236.

SIGNATURE _____ # _____ DATE _____

Your thumbprints may be taken at any State Police Office or local law enforcement office. You must present one accurate official photo identification card at the time of the re-registration. You may elect to purchase a black ink pad to take your own prints by placing your left and right thumb in the designated blocks. Your prints must be legible and not too dark. Once the form is completed and returned to State Police, your prints will be classified.

MAIL THIS FORM TO:
DEPARTMENT OF STATE POLICE
CENTRAL CRIMINAL RECORDS EXCHANGE
ATTN: SEX OFFENDER REGISTRY
P.O. BOX 27472
RICHMOND, VA 23261-7472

LEFT THUMB	RIGHT THUMB