GENDER DESIGNATION ON A LICENSE OR IDENTIFICATION CARD

PROCEDURE FOR CHANGING GENDER DESIGNATION ON DRIVER’S LICENSE OR IDENTIFICATION CARD

Applicants requesting a change of the gender designation on their driver’s license or identification card from that showing on their identity proof documents must:

- Surrender any current state-issued license or identification card;
- Submit a completed Gender Designation form; and
- Pay applicable fees for new or amended license. The applicant shall have a new photograph taken.

Employees shall not request additional gender-related information beyond that required on the applicable forms or otherwise inquire about the applicant’s private medical history or records.

Until the Department of Motor Vehicles is able to provide all employees comprehensive training on this procedure, gender designation applications should be directed to DMV service center managers.

PRIVACY OF INFORMATION RELATING TO GENDER DESIGNATION

The Gender Designation form contains private medical information and will be kept confidential and protected under the provisions of the Driver Privacy Protection Act.

MATCHING GENDER DATA FROM OTHER SOURCES

DMV will change the gender designation on an applicant’s license or identification card contingent on the submission of the fully and accurately completed Gender Designation form. The applicant is not required to have changed his or her gender designation on other forms of identification.

CHANGE OF NAME

Name changes related to gender are completed via submission of appropriate court documents and must also be reflected on the Social Security card.

DMV. Ver. 11/2006
Gender Designation Form

PART ONE: TO BE COMPLETED BY APPLICANT

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
<th>Social Security Number</th>
</tr>
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<tbody>
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</table>

<table>
<thead>
<tr>
<th>Street Address</th>
<th>City/State</th>
<th>Zip Code</th>
<th>License/Identification Number</th>
</tr>
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<tbody>
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Washington, D.C.

I, ______________________________ wish to designation the gender on my driver’s license or identification card to read: circle one: Male Female

I hereby certify under penalty of law that this request for gender designation is for the purpose of ensuring my driver’s license / identification card accurately reflects my gender identity and is not for any fraudulent or other unlawful purpose.

Signature: ___________________________ Date: ___________

PART TWO: TO BE COMPLETED BY MEDICAL OR SOCIAL SERVICE AUTHORITY

<table>
<thead>
<tr>
<th>Provider Last Name</th>
<th>Provider First Name</th>
<th>Provider Title</th>
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<tbody>
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</table>

Provider Organization Name (if applicable)

<table>
<thead>
<tr>
<th>Provider Street Address</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
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Provider Phone	Provider E-mail	Provider Organization or Professional License Number

I am a:

- [ ] Physician
- [ ] Licensed therapist or counselor
- [ ] Case worker or social worker
- [ ] Other. Please specify:

In my professional opinion, the applicant’s gender identity is (circle one): Male Female and can reasonably be expected to continue as such in the foreseeable future.

I hereby certify under penalty of law the foregoing information is true and correct.

Signature: ___________________________ Date: ___________

Any person using a fictitious name or address and/or knowingly making any false statement on this application is in violation of D.C. Law and subject to a fine of not more than $1,000 or 180 days imprisonment or both. (D.C. Official Code §22-2405).

To report waste, fraud and abuse by any DC Government agency or official, call the DC Inspector General at 1-800-521-1639. Ver. 11/2006
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