

STATE OF ARKANSAS Department of Finance and Administration

## LICENSE/ID PHOTO AFFIDAVIT-MEDICAL

	NAME OF APPLICANT				
<b>PPLICANT</b> FORMATION	DATE OF BIRTH	PHONE NUMBER	DRIVER'S LICENSI	DRIVER'S LICENSE NUMBER	
	ADDRESS				
A INI	СІТҮ		STATE	ZIP-CODE	
Z	IS HEAD COVERING REQUIRED DUE TO MEDICAL CONDITION?				
<b>MEDICAL</b> FORMATIO	YES 🗆	NO 🗆			
	I am undergoing treatment for an illness that causes hair loss. I opt to use the photograph on file from my most recent driver's license and have included a statement from my treating physician.				
L J	YES 🗆	NO 🗆	N/A		

Head coverings may be worn in a driver's license or identification card photograph for medical conditions but must be adjusted to allow a full-face photograph to enable facial image capture.

Under Ark. Code Ann. § 27-16-801(b)(3), a Licensee undergoing treatment for hair loss may use the photograph on file from the most recent driver's license for one renewal and must provide a statement from a treating physician. If this request is found to be made unlawfully, fraudulently, or by deceit, the Department reserves the right to revoke or cancel a license at the Licensee's expense.

I attest under penalty of perjury that I have a medical condition which requires me to wear a head covering. I understand that a facial recognition photograph is required.

Printed Name of Licensee

Signature of Licensee

Date

Printed Name of Parent/Legal Guardian

Signature of Parent/Legal Guardian

Date