

## **GENDER CATEGORY REQUEST**



This form is not a name change form. The name used on this form must be your true full name at the time the gender category request is made. Additional name change information and privacy information is listed on the back of the form. Please print in blue or black ink.

SECTION 1 — API	PLICANT INFURMATION	ON (True זעוו name req California Code of	quirea, no "nickname f Regulations §15.06		ses pursuant to
NAME (FIRST, MIDDLE, LAST,	SUFFIX)		<u> </u>	,	
DATE OF BIRTH (MM,DD,YYY	γ)		CA	DRIVER LICENSE	//IDENTIFICATION CARD NUMBER
MAILING ADDRESS					
CITY			STA	ίΤΕ	ZIP CODE
RESIDENCE ADDRESS (IF DIF	FFERENT FROM MAILING ADDRESS	3)			
CITY			STA	ίΤΕ	ZIP CODE
I request the gende ☐ Male (M)	er category on my Califo	fornia Driver License/Ide	entification card to rea	ıd:	
SECTION 2 — CE	RTIFICATION				
identification card	d accurately reflects m	ny gender identity and	l is not for any fraud	ulent or ot rnia that th	ring my driver license/ her unlawful purpose. e foregoing is true and
				·	
		DMV USE O	NLY		
DRIVER LICENSE/IDENTIFICA	ATION CARD NUMBER	DATE	LINE STAMP		

## INFORMATION FOR GENDER CATEGORY REQUEST

The name you provide in Section 1 must be your true full name. If that name is different from the one on your identity documents or DL/ID card, you will also be required to present a document to verify your name change. Acceptable documents include, but are not limited to, birth certificates, passports, certificates of naturalization, and court orders or judgements indicating a name change. Documents are only acceptable if they are valid/unexpired, original or certified copies. For a complete list of acceptable documents, see **www.dmv.ca.gov**.

## **PRIVACY NOTICE**

- DMV uses this form to process a gender category request on your California Driver License or Identification Card.
- Information provided to DMV on this form is collected and subject to the limitations in the Information Practices Act (*Civil Code* §1798 et seq.), the Driver's Privacy Protection Act (18 U.S.C. 2721-2725), the *California Vehicle Code* (CVC) (§§1653.5, 12800, 12801, 13000, 13001, and 14902) and other applicable state and federal laws and regulations.
- DMV verifies the information and documents you provide with other governmental agencies.
- All records of the department relating to the physical or mental condition of any person are confidential and not open to public inspection per CVC §1808.5.
- All information on this form is mandatory except where noted. DMV may deny your application for not providing the required information.
- DMV shares your information with other governmental agencies, law enforcement, and commercial entities as authorized by law. You may obtain a copy of your record at www.dmv.ca.gov or at any DMV field office during regular office hours. For assistance with access to your record, call 1-800-777-0133 or make an appointment to visit a DMV field office during regular business hours. For assistance with corrections to your record, contact DMV's Licensing Operations Division Mandatory Actions Unit at (916) 657-6525.
- · Questions regarding your Driver License or Identification Card should be addressed to:

Driver License Inquiries
Department of Motor Vehicles
PO Box 942890
Sacramento, CA 94290-0001

- For more information regarding specific CVC Sections or how DMV shares your information, please visit www.dmv.ca.gov.
   You may also request a copy of How Your DMV Information is Shared (FFDMV 17) Fast Facts brochure from any field office.
- DMV's Privacy Policy is located at www.dmv.ca.gov under the "Privacy Policy" link at the bottom of the page.
- Questions regarding this privacy notice should be addressed to:

Department of Motor Vehicles ATTN: Chief Privacy Officer – MS F127 PO Box 932328 Sacramento, CA 94232-3280