

# Authentication/Evaluation Form

## Forensic Signature Authentication

Date: \_\_\_\_\_ Forensic Signature Authentication ID Number: \_\_\_\_\_

### Item Type/Description:

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### Questioned Signature/s:

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### Authentication Evaluation Process

1. Object evaluation	Pass_____	Fail_____
2. Ink and writing instrument evaluation	Pass_____	Fail_____
3. Letter formation	Pass_____	Fail_____
4. Letter size	Pass_____	Fail_____
5. Connecting strokes	Pass_____	Fail_____
6. Relationship between letters	Pass_____	Fail_____
7. Slant of signature	Pass_____	Fail_____
8. Base line	Pass_____	Fail_____
9. Beginning strokes	Pass_____	Fail_____
10. Ending strokes	Pass_____	Fail_____
11. Flow of signature	Pass_____	Fail_____
12. Pen pressure	Pass_____	Fail_____
13. Stops, Starts and Lifting	Pass_____	Fail_____
14. Hesitations	Pass_____	Fail_____
15. Tremors	Pass_____	Fail_____
16. Side by side comparison	Pass_____	Fail_____

Evaluation Comments/Conclusion:

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Evaluation Completion Date: \_\_\_\_\_

Evaluator's Name: \_\_\_\_\_