FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* NICKELSON DONALD E | | | | 2. Issuer Name and Ticker or Trading Symbol FIRST ADVANTAGE CORP [FADV] | | | | | | | | Relationship of the Relati | able) | 10% Owner | | | | |
|--|---|------------|---|---|---|--|-------------------|----------------------|--|--|-----------------------|--|---|---|---|--|--|---------------------------------------|
| (Last) (First) (Middle) 100 CARILLON PARKWAY | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/29/2009 | | | | | | | | Officer below) | (give title | | Other (s below) | specify | |
| (Street) ST. PETERS | BURG F | L | 33716 | | 4. 1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Lin | e) X Form fi Form fi | dividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (\$ | State) | (Zip) | | | | | | | | | | | | | | | |
| | | Tal | ole I - Noi | ո-Deri | vativ | e Se | curit | ties Acc | quired | , Dis | posed o | f, or Be | neficia | ly Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | Execution | | tion Date, | Transaction Dispo | | Disposed | curities Acquired (A) sed Of (D) (Instr. 3, | | Securitie Beneficia Owned F | 5. Amount of Securities Beneficially Owned Following Reported | | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Owners () | | |
| | | | | | | | Code | v | Amount | ınt (A) or Pr | | Transact (Instr. 3 a | tion(s) | | | (Instr. 4) | | |
| Class A Common Stock 04/29 | | | | 29/200 | 9/2009 | | M | | 1,054 | 2) A | (1) | 2,945 | | | D | | | |
| | | | Table II - | | | | | | | | osed of, convertib | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deemed Execution I if any (Month/Day | Date, | 4. Transa Code (8) | | | | 6. Date Exercis Expiration Date (Month/Day/Yea | | e Amount of | | of s ng e Security | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio | e s Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amount or Number of Shares | | (Instr. 4) | | | |
| Restricted Stock Unit | (1) | 04/29/2009 | | | M | | | 1,054 ⁽²⁾ | (3) | | (3) | Class A Common | 1,054 | (1) | 7,953 | 3 | D | |

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of FADV common stock.
- 2. First vesting of the 3,166 restricted stock units the reporting person received as his 2008 annual equity retainer as a director of FADV.
- 3. The restricted units vest cumulatively in 3 annual installments with the first installment vesting April 29, 2009. The first year and second year vesting installments are 33.3% each. The third year vesting installment is at 33.4%.

Sharlyn Nudelman, Power of **Attorney**

05/01/2009

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.