

REQUEST FOR LIVE SCAN SERVICE  
Applicant Submission for Public Schools or Joint Powers Agencies

ORI: A4448

Code assigned by DOJ

Type of Application: (Check One)  Classified School Emp  Credentialed School Emp

The following selections are for Public Schools Only:

License, Certification, Permit  Peace Officer  Law Enforcement Personnel  Volunteer

Job Title or Type of License, Certification or Permit

Agency Address Set Contributing Agency:

LA MESA -SPRING VALLEY SCHOOL DISTRICT

Agency authorized to receive criminal history information

01771

Mail Code (five-digit code assigned by DOJ)

4750 DATE AVENUE

Street or PO Box Number

Katie Kenley

Contact Name (Mandatory for all school submissions)

LA MESA

City

CA

State

91942

Zip Code

(619) 668-5700 X 6375

Contact Telephone Number

Name of Applicant:

(Please print)

Last

First

MI

AKA's

Last

First

CDL NO: \_\_\_\_\_

DOB: \_\_\_\_\_

SEX: Male

Female

Misc No. BIL140288

HT: \_\_\_\_\_

WT: \_\_\_\_\_

Misc No. \_\_\_\_\_

(Applies only if Youth Org/HRA or Public utility submission)

EYE Color: \_\_\_\_\_

HAIR Color: \_\_\_\_\_

Home Address:

PLACE OF BIRTH: \_\_\_\_\_

Street or PO BOX

SSN: \_\_\_\_\_

City, State and Zip Code

Your Number: \_\_\_\_\_

OCA No. (Agency Identifying No)

Level of Service

DOJ

FBI

If resubmission, list Original ATI No. \_\_\_\_\_

Live Scan Transaction Completed By: \_\_\_\_\_

Date \_\_\_\_\_

Name of Operator

Transmitting Agency

ATI NO

Amount Collected/ Billed

Signature

Phone

Date

BC11 8016 (REV01/14) ORIGINAL- Live Scan Operator; SECOND COPY- Requesting Agency; THIRD COPY-Requesting Agency