



# Lowell Joint School District



*A Tradition of Excellence Since 1906*

*"Home of Scholars and Champions"*

Thank you for your interest in chaperoning or participating in your student's school field trips. Live Scan fingerprint clearance is necessary to chaperone in Lowell Joint School District. Live Scan is the electronic submission of your fingerprints to the Department of Justice. If you have been fingerprinted in another district or another agency, you will still need to be fingerprinted for Lowell Joint.

There is a processing fee and a rolling fee for fingerprints. The processing fee for the Department of Justice is approximately \$32.00 and the rolling fee will vary depending on the location you choose.

After you have completed your Live Scan please submit your completed form to your school's Office Manager who will follow up with the District Office. Your fingerprint clearance will remain valid throughout your student's education with Lowell Joint School District.

We apologize, at this time we do not have any definitive suggestions on local places to get your prints done. Some suggestions would be a local law enforcement agency or possibly a UPS store. As of this printing, places have closed or are in the middle of renewing licenses.

If you have any questions, please contact your school's Office Manager -

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Superintendent of Schools: Jim Coombs

Board of Trustees: Melissa A. Salinas, Karen L. Shaw Anastasia M. Shackelford, Anthony Zagarra



### REQUEST FOR LIVE SCAN SERVICE (Public Schools or Joint Powers Agencies)

#### Applicant Submission

ORI: AB447 Type of Applicant:  Classified School Employee  Credentialed School Employee  
Code assigned by DOJ

**The following selections are for Public Schools only:**

License, Certification, Permit  Peace Officer  Law Enforcement Officer  Volunteer

Type of License/Certification/Permit OR Working Title: Site - El Portal  
(Maximum 30 characters - if assigned by DOJ, use exact title assigned)

#### Contributing Agency Information:

Lowell Joint School District Agency Authorized to Receive Criminal Record Information  
11019 Valley Home Ave. Street Address or P.O. Box  
Whittier CA 90603 City State ZIP Code  
01818 Mail Code (five-digit code assigned by DOJ)  
Mr. Jim Coombs Contact Name (mandatory for all school submissions)  
5629430211 Contact Telephone Number

#### Applicant Information:

Last Name Other Name: (AKA or Alias) Last Date of Birth Sex  Male  Female Height Weight Eye Color Hair Color Place of Birth (State or Country) Social Security Number Home Address Street Address or P.O. Box First Name Middle Initial Suffix First Suffix Driver's License Number Billing Number (Agency Billing Number) Misc. Number (Other Identification Number) City State ZIP Code

I have received and read the included Privacy Notice, Privacy Act Statement, and Applicant's Privacy Rights.

Applicant Signature

Date

Your Number: Level of Service:  DOJ  FBI  
(OCA Number (Agency Identifying Number))

If re-submission, list original ATI number:  
(Must provide proof of rejection) Original ATI Number

#### Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed