

## REQUEST FOR LIVE SCAN SERVICE

(Public Schools or Joint Powers Agencies)

Applicant Submission	<del>-</del>						
ORI: AD474  Code assigned by DOJ	Type of Applicant:	⊠ Classifie	ed School Employee	Credentiale	d School E	mployee	:
The following selections are	for Public Schools or	nly:					
License, Certification, Perm	it Peace Officer	Law E	Enforcement Officer	☐ Volunteer			
Type of License/Certification/Pe	ermit <u>OR</u> Working Title	<del></del>	chool employee	so exact title ensigned			
Contributing Agency Informatio	n:		- assigned by Dos, u	se exact title assigned)			
Orcutt Union School District Agency Authorized to Receive Crimina		·	01913 Mail Code (five-digit cod	de assigned by DOI)			
500 Dyer Street Street Address or P.O. Box			Dayana Atanasova Contact Name (mandatory for all school submissions)				
Orcutt City	CA 93455 State ZIP Cod		(805) 938-8910 Contact Telephone Nur				
Applicant Information:		<del></del>		·		<del></del>	
Last Name			First Name		Middle li	nitial	Suffix
Other Name (AKA or Alias) Last		<u></u>	First			<u> </u>	Suffix
Date of Birth Se	x Male Female		Driver's License Number	er	<u> </u>		
Height Weight	Eye Color Hair (	Color	Billing Number				
Place of Birth (State or Country)	Social Security Number	····	(Agency Billing Misc. Number			···	
Home Address			(Other (denlific	cation Number)			
Street Address or P.O. Box		<del>-</del>	City	-	State	ZIP Code	<del>)</del>
Your Number:			Level of Service:	⊠ DOJ 🗀 I	FBI		
If re-submission, list original AT (Must provide proof of rejection			Original ATI Number				
Live Scan Transaction Comple	ted By:			·	<del></del>		
Name of Operator			Date	<del></del>			
Transmitting Agency	LSID		ATI Number	Amou	int Collected/	Billed	
						~	