

Example of how to fill out the first 4 sections:

REQUEST FOR LIVE SCAN SERVICE
Applicant Submission

1

ORI: LEAVE BLANK Type of Application: Employment
Job Title or Type of License, Certification or Permit: [Working title, not payroll title]

2

Agency Address Set Contributing Agency:
DEPARTMENT NAME LEAVE BLANK
Agency authorized to receive criminal history information Mail Code (five digit code assigned by DOJ)
Street No. Street or P. O. Box Department Hiring Rep/Authority
Contact Name (Mandatory for all school submissions)
City State Zip Code Contact Telephone Number

3

Name of Applicant: Last First MI
(please print)
Alias: Last First Driver's License No. LEAVE BLANK
Date of Birth: Sex: Male Female Misc. No. BIL- LEAVE BLANK
Agency Billing Number
Height: Weight: Misc. No. LEAVE BLANK
Eye Color: Hair Color: Home Address: Street or P.O. Box
Place of Birth: City, State and Zip Code
SOC: Applicant's Social Security Number

4

Your Number: LEAVE BLANK Level of Service DOJ FBI
OCA No. (Agency Identifying No.)
If resubmission, list original ATI No. LEAVE BLANK