



REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

AT980
ORI (Code assigned by DOJ)

Vounteer/VCA
Authorized Applicant Type

Childcare worker
Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

New Life Presbyterian Church of La Mesa
Agency Authorized to Receive Criminal Record Information

5333 Lake Murray Blvd.
Street Address or P.O. Box

La Mesa CA 91942
City State ZIP Code

27656
Mail Code (five-digit code assigned by DOJ)

M. Connor Underseth
Contact Name (mandatory for all school submissions)

6196675999
Contact Telephone Number

Applicant Information:

Last Name _____ First Name _____ Middle Initial _____ Suffix _____

Other Name (AKA or Alias) Last _____ First _____ Suffix _____

Date of Birth _____ Sex Male Female _____ Driver's License Number _____

Height _____ Weight _____ Eye Color _____ Hair Color _____ Billing Number 161148
(Agency Billing Number)

Place of Birth (State or Country) _____ Social Security Number _____ Misc. Number _____
(Other Identification Number)

Home Address Street Address or P.O. Box _____ City _____ State _____ ZIP Code _____

Your Number: _____
OCA Number (Agency Identifying Number)

Level of Service: DOJ FBI
(If the Level of Service indicates FBI, the fingerprints will be used to check the criminal history record information of the FBI)

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

F252UNM264
Original ATI Number

Employer (Additional response for agencies specified by statute):

Employer Name _____ Mail Code (five digit code assigned by DOJ) _____

Street Address or P.O. Box _____

City _____ State _____ ZIP Code _____ Telephone Number (optional) _____

Live Scan Transaction Completed By:

Name of Operator _____ Date _____

Transmitting Agency _____ LSID _____ ATI Number _____ Amount Collected/Billed _____