



REQUEST FOR LIVE SCAN SERVICE

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Applicant Submission

A5028
ORI (Code assigned by DOJ)

Classified
Authorized Applicant Type

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

Contributing Agency Information:

Auburn Union School District
Agency Authorized to Receive Criminal Record Information

01525
Mail Code (five-digit code assigned by DOJ)

255 Epperle Lane
Street Address or P.O. Box

Janel Raynor
Contact Name (mandatory for all school submissions)

Auburn CA 95603
City State ZIP Code

5307458813
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 100071
(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

Agency 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)

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