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

Applicant Submission

ORI: A6768 (Code assigned by DOJ) Type of Applicant: ☐ Classified School Employee ☐ Credentialed School Employee

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: School Name:
(Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

Cupertino Union School District — Agency Authorized to Receive Criminal Record Information
A01619 — Mail Code (five-digit code assigned by DOJ)
10301 Vista Drive — Street Address or P.O. Box
Leslie Mains — Contact Name (mandatory for all school submissions)
Cupertino — City; CA — State; 95014 — ZIP Code
4082523000 — 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 (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

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

Applicant Signature; Date

Your Number: School Name:
(OCA Number (Agency Identifying Number)

Level of Service: ☒ DOJ ☐ FBI

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