

REQUEST FOR LIVE SCAN SERVICE

BCII 8016 (3/07)

Applicant Submission

ORI: A3797 Type of Application: Volunteer
Code assigned by DOJ
 Job Title or Type of License, Certification or Permit: Youth Volunteer - Non Profit

Agency Address Set Contributing Agency:
Worldwide Church of God 05623
Agency authorized to receive criminal history information Mail Code (five-digit code assigned by DOJ)
1001 Arcadia Ave #22 Janet Morrison
Street No. Street or PO Box Contact Name (Mandatory for all school submissions)
Arcadia Ca. 91007 (626) 445-6098
City State Zip Code Contact Telephone No.

Name of Applicant: _____
(Please print) Last First MI
 Alias: _____ Driver's License No: _____
Last First
 Date of Birth: _____ Sex: Male Female Misc. No. BIL - N/A
Agency Billing Number
 Height: _____ Weight: _____ Misc. Number: N/A
 Home Address: _____
 Eye Color: _____ Hair Color: _____
Street No. Street or PO Box
 Place of Birth: _____
City, State and Zip Code
 Social Security Number: _____

Your Number: N/AA
OCA No. (Agency Identifying No.)
 Level of Service: DOJ FBI
 If resubmission, list Original ATI Number: _____

Employer: (Additional response for agencies specified by statute)

 Employer Name

 Street No. Street or PO Box Mail Code (five digit code assigned by DOJ)

 City State Zip Code Agency Telephone No. (optional)

Live Scan Transaction Completed By: _____
Name of Operator Date

 Transmitting Agency ATI No. Amount Collected/Billed
