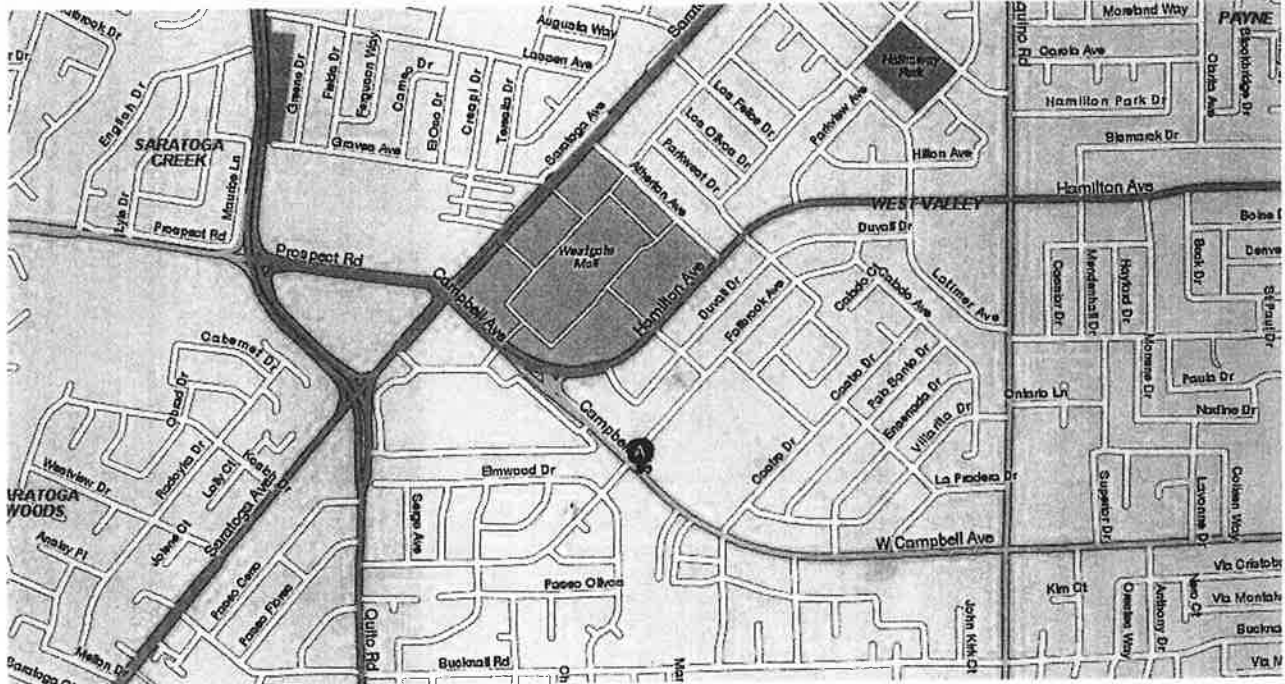


Moreland School District Livescan Fingerprint Services

Location: 4711 Campbell Avenue
San Jose, CA 95130

Appointments: Contact: Judy Ross (408)874-2944



Please contact Judy Ross at (408) 874-2944 as soon as possible to schedule a Livescan appointment. *The Moreland School District does not take walk-ins.*

Thank you for your time in this matter.

REQUEST FOR LIVE SCAN SERVICE

BCII 8016A (3/07)

Applicant Submission for Public Schools or Joint Powers Agencies

ORI: A 6891
Code assigned by DOJ

Type of Applicant: (check one) Classified School Emp. Credentialed School Emp

The following selections are for Public Schools only:

License, Certification, Permit Peace Officer Law Enforcement Personnel Volunteer

Job Title or Type of License, Certification or Permit: _____

Agency Address Set Contributing Agency:

<u>Campbell Union High School District</u>		<u>01572</u>
Agency authorized to receive criminal history information		Mail Code (five-digit code assigned by DOJ)
<u>3235 Union Avenue</u>		<u>M. Torres</u>
Street No.	Street or P.O. Box	Contact Name (Mandatory for all school submissions)
<u>San Jose</u>	<u>CA</u> <u>95124</u>	<u>(408) 371-0960 extension 2020</u>
City	State Zip Code	Contact Telephone Number

Name of Applicant:

(Please print) Last _____ First _____ Middle Initial _____

AKA's: Last _____ First _____ CDL No. _____

DOB: _____ SEX: Male Female Misc. No. **BIL** 140358
Agency Billing Number

HT: _____ WT: _____ Misc. No. _____

EYE Color: _____ HAIR Color: _____ Home Address: (Applies only if Youth Org. / HRA or Public Utility submission)

POB: _____ Street or P.O. Box _____

SOC: _____ City, State and Zip Code _____

Your Number: n/a
OCA No. (Agency Identifying No.)

Level of Service: DOJ FBI

If resubmission, list Original ATI No. _____

Live Scan Transaction Completed By: _____ Date: _____
Name of Operator

Transmitting Agency _____ ATI Number _____ Amount Collected/Billed _____