REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

AR828
ORI (Code assigned by DOJ)

Volunteer / 11105.3 PC (97077)
Authorized Applicant Type

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

Contributing Agency Information:

The Church of Jesus Christ of Latter-day Saints
Agency Authorized to Receive Criminal Record Information

26471
Mail Code (five-digit code assigned by DOJ)

50 E. North Temple
Street Address or P.O. Box

Scott R Peterson
Contact Name (mandatory for all school submissions)

Salt Lake City
City

UT
State

84150
ZIP Code

(801) 240-6238
Contact Telephone Number

Applicant Information:

Last Name

First Name Middle Initial Suffix

Other Name: (AKA or Alias)

Last Name

First Name Suffix

Date of Birth

Sex ☐ Male ☐ Female

Driver's License Number

Height Weight Eye Color Hair Color

Billing Number N/A
(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: Rocklin Stake
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

Street Address or P.O. Box

Telephone Number (optional)

City State ZIP Code

Mail Code (five digit code assigned by DOJ)

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency LSID ATI Number Amount Collected/Billed