State of California

Department of Justice

REQUEST FOR LIVE SCAN SERVICE

BCII 8016A (3/07)

Applicant Submission for Public Schools or Joint Powers Agencies

ORI: A1290
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: Substitute Teacher

Agency Address Set Contributing Agency:

Tri-County Substitute Teacher Consortium
Agency authorized to receive criminal history information

04287
Mail Code (five-digit code assigned by DOJ)

970 Klamath Lane
Street No. Street or P.O. Box

Kathy Tamez
Contact Name (Mandatory for all school submissions)

Yuba City — City
California — State
95993 — Zip Code

(530) 822-2904
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**
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:
OCA No. (Agency Identifying No.)

Level of Service: ☑ DOJ ☐ FBI

If resubmission, list Original ATI No.

Live Scan Transaction Completed By:
Name of Operator

Date:

Transmitting Agency

ATI Number

Amount Collected/Billed

ORIGINAL-Live Scan Operator; SECOND COPY - Applicant; THIRD COPY (if needed) - Requesting Agency