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

Applicant Submission

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

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: Parent Volunteer - School:
(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 01619
10301 Vista Drive
Street Address or P.O. Box
Cupertino, CA 95014
City State ZIP Code

Applicant Information:

Last Name Other Name (AKA or Alias) Dist
First Name Middle Initial Suffix
First Suffix
Date of Birth Sex ☐ Male ☐ Female
Height Weight Eye Color Hair Color
Place of Birth (State or Country) Social Security Number
Home Address Street Address or P.O. Box
City State ZIP Code

Your Number: School Name: Level of Service: ☒ DOJ ☐ FBI
(OCA Number (Agency Identifying Number)

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

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