STATE OF CALIFORNIA
BCIA 8016A
(orig. 04/2001; rev. 01/2011)

DEPARTMENT OF JUSTICE

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

Print Form Reset Form

Applicant Submission

ORI: A0844 (Code assigned by DOJ)

Type of Applicant: ☐ Classified School Employee ☐ Credentialed School Employee

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: VOLUNTEER
(Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

LIVERMORE VALLEY JOINT USD
Agency Authorized to Receive Criminal Record Information

01802
Mail Code (five-digit code assigned by DOJ)

685 E. JACK LONDON BLVD.
Street Address or P.O. Box

AMY ROBBINS
Contact Name (mandatory for all school submissions)

LIVERMORE | CA | 94551
City | State | ZIP Code

(925) 606-3269
Contact Telephone Number

Applicant Information:

Last Name | First Name | Middle Initial | Suffix

Other Name (AKA or Alias) Last | First | Suffix

Date of Birth | Sex ☐ Male ☐ Female | Driver's License Number

Height | Weight | Eye Color | Hair Color | Billing Number (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

Your Number:
(OCA Number (Agency Identifying Number))

Level of Service: ☒ DOJ ☒ FBI

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