

Tarjetas de Autorización de Huellas Dactilares IVP Paso a Paso



Antes de comenzar

Las tarjetas de Autorización de Huellas Dactilares IVP son emitidas por medio del Departamento de Seguridad Pública de Arizona (AZDPS por sus siglas en inglés). Antes de comenzar necesitarán;

- Un correo electrónico personal válido para recibir enlaces de verificación e información
- Su número de Seguro Social
- Una tarjeta de débito o crédito para el pago
- Papel y lápiz para escribir la información

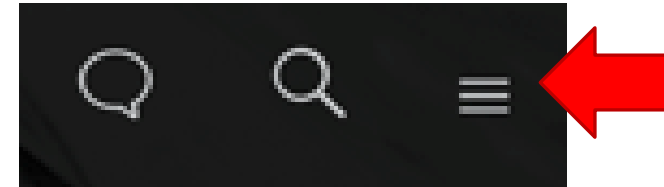
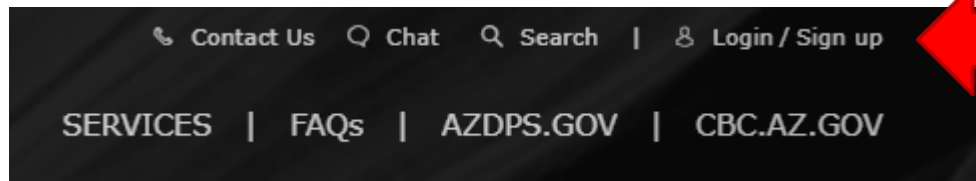


Paso 1: Creen su Cuenta DPS

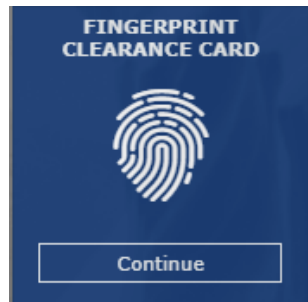
1. Diríjanse al Portal de 'Arizona DPS Public Services'

<https://psp.azdps.gov>

2. Hagan clic en 'Login / Sign up'



3. Elijan 'Fingerprint Clearance card' para el tipo de cuenta



Paso 1: Creen su Cuenta DPS

4. Elijan 'Individual'



5. Creen una cuenta utilizando una dirección válida de correo electrónico .

- Guarden su nombre de usuario (username)/contraseña (password)
- Si ya tienen una cuenta, solo inicien sesión (Log in)

6. Revisen su correo electrónico y hagan clic en el enlace de verificación (Verification Link)

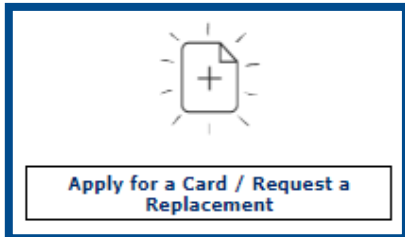


Paso 2: Soliciten la Tarjeta IVP

1. Después de verificar, inicien sesión y elijan 'Fingerprint Clearance Card'

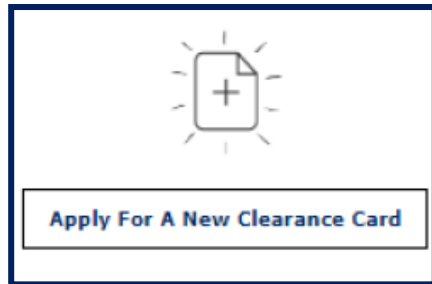


2. Elijan 'Apply for a Card / Request a Replacement'

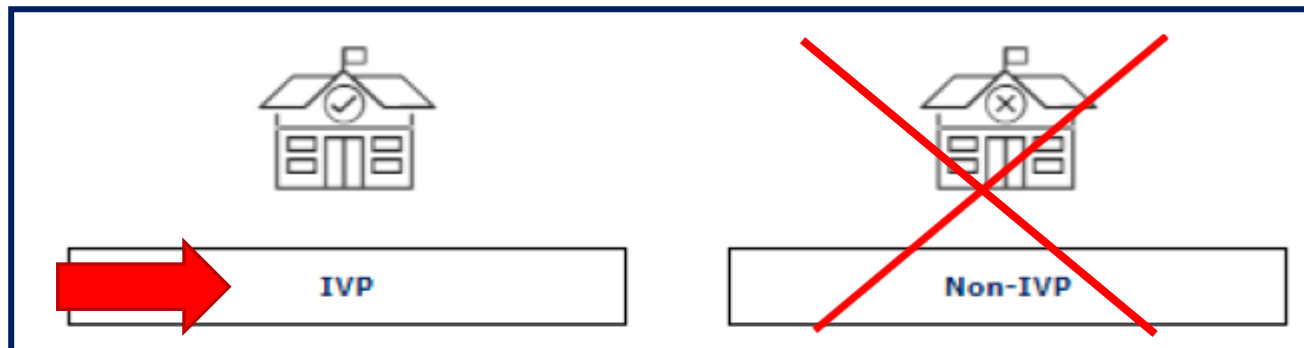


Paso 2: Soliciten la Tarjeta IVP

3. Seleccionen 'Apply for a New Clearance Card'.



4. Seleccionen 'IVP Clearance Card'



Paso 2: Soliciten la Tarjeta IVP

5. Lean y acepten la Declaración de Privacidad (marquen en la parte inferior)

Privacy Act Statement

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include federal statutes, state statutes pursuant to pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

To obtain a copy of your records or request a review, update or correct, you can contact Records Department at (603) 223-3232 or go to <https://pep.usdps.gov> and choose "Criminal History Review and Challenge" from the Services Menu to file your Review and Challenge on-line.

☒ By signing the background check for employment/licensure application, you are acknowledging you have read this "Privacy Act Statement".



Paso 2: Soliciten la Tarjeta IVP

6. Motivo de la Solicitud

Check all the box(es) to indicate why you are applying*

- ☐ State Board of Education (Teacher or Other Certification) ARS § 15-534
- ☐ Tutor or Teacher Preparation Programs ARS § 15-534
- ☐ Charter School Instructor ARS § 15-183
- ☐ School Bus Driver ARS § 28-3228
- ☒ Public and/or Charter School Non-Certified Personnel ARS § 15-512
- ☐ Public and/or Charter School Contractor, Subcontractor or Vendor and their Employees ARS § 15-512.

Is the person an employee or volunteer? *

☒ Employee ☐ Volunteer

Are there other reasons you are applying? *

☐ Yes ☒ No



Paso 2: Soliciten la Tarjeta IVP

7. Completen Su Información Personal – Deben incluir seguro social
No usen su correo electrónico del WESD – solo el correo electrónico personal

Applicant Information 

Applicant Information
Please enter the Legal Name

First Name *

Last

Middle Initial

Last Name *

Portrait

Social Security Number *



Paso 2: Soliciten la Tarjeta IVP

8. Completen la información del Empleador

Employment Information

Name of Employer and/or Agency
Washington Elementary School District

Employer's Phone Number
602 347 2600

Extension

Employer and/or Agency Mailing Address ⓘ 4650 W Sweetwater Ave

City
Glendale

State
Arizona

Zip Code
85304



Utilicen esta información

Name: Washington Elementary School District

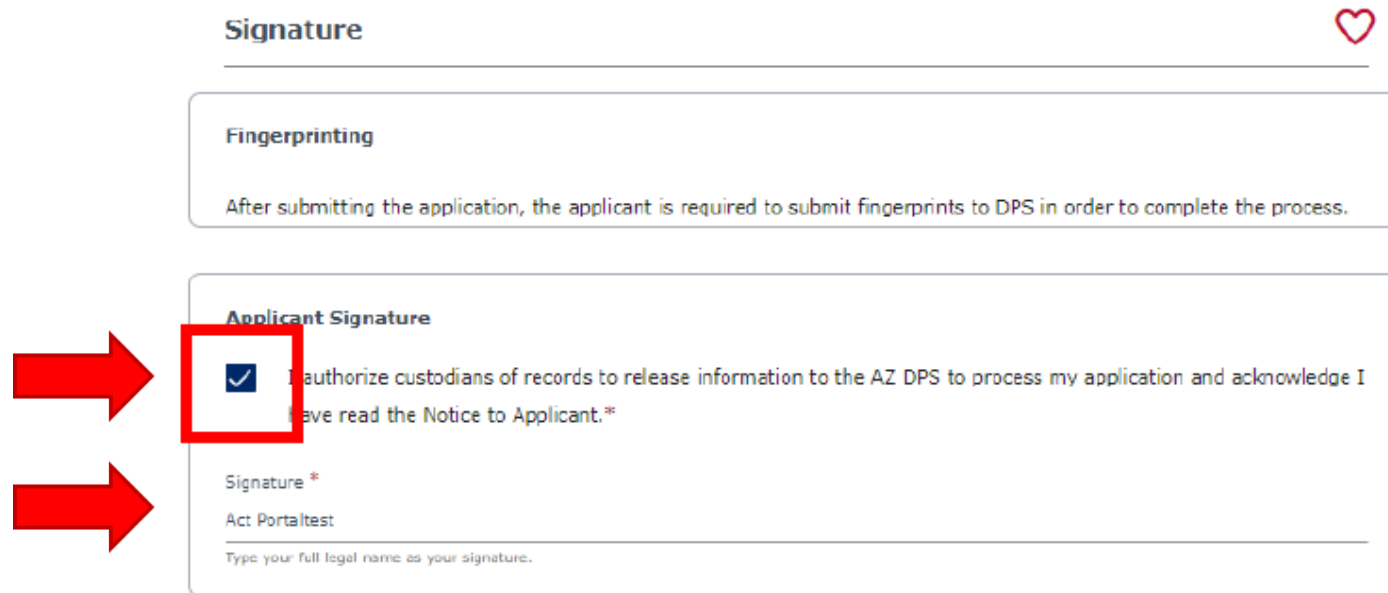
Phone Number: 602 347 2600

Address: 4650 W Sweetwater Ave
Glendale AZ 85304



Paso 2: Soliciten la Tarjeta IVP

9. Lean la declaración, marquen la casilla de confirmación de lectura y firmen



Signature 

Fingerprinting

After submitting the application, the applicant is required to submit fingerprints to DPS in order to complete the process.

Applicant Signature

☒ I authorize custodians of records to release information to the AZ DPS to process my application and acknowledge I have read the Notice to Applicant.*

Signature *

Act Portaltest

Type your full legal name as your signature.



Paso 3: Pago y Confirmación

1. Revisen la solicitud y luego hagan clic en 'Continue to My Order' para completar su pago.

My Order

Once your request is completed you will receive an invoice with the fees for any pending items.

Per Arizona Revised Statutes all fees are nonrefundable.

Fingerprint Clearance Cards

Item ↓	Fee ↑	
Fingerprint Clearance Card Application (non-IVP)	\$67.00	
Credit Card Fee	\$1.34 ⓘ	Save for Later Delete
Total	\$68.34	

Submit & Pay by Agency Code

Submit & Pay by Credit Card

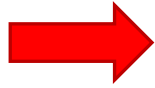
Request Employer Pay



Paso 3: Pago y Confirmación

2. Completen la confirmación de lectura del pedido para continuar

Order Acknowledgement

 ☐ I understand that after I pay, I will need to log back into the Public Services Portal and go to my Message Center for further instructions and important information regarding my submission.

 ☐ I understand that per Arizona Revised Statutes, all fees are nonrefundable.





Paso 3: Pago y Confirmación

3. Ingresen sus Datos Bancarios.

State of Arizona Checkout Utility
State of Arizona

PAYMENT INFORMATION

CHECKOUT - PAYMENT INFORMATION

NOTICE: Before submitting your payment information, please ensure that your address on the credit card or credit card company is up to date with the address you are entering here. If your address does not match, your payment might be impacted.

* First Name

* Last Name

* Billing Address

Billing Address 2

* City

* State

* Zip

* Email

* Phone Number

Include area code

☒ Credit Card

☐ Electronic Check

Credit Cards issued by a foreign bank or entity are not an acceptable form of payment due to the system's inability to confirm security measures. As an alternative, please use a secured or prepaid Credit Card issued by a US entity or bank.

* Credit Card Number

* Expiration Month

* Expiration Year

* CVC/CVV



Una vez que lleguen a este paso, se cerrará su sesión en el sitio de DPS.



Paso 3: Pago y Confirmación

4. Revisión del Pedido (verifiquen la información)



State of Arizona Checkout Utility
State of Arizona

Order Review

Please review your order and ensure the information below is correct before proceeding.
If you agree with the information as displayed, please click the "Authorize" button to process the payment.

BILLING INFORMATION

Name

Address

Email

Phone Number

Edit

ACCOUNT INFORMATION



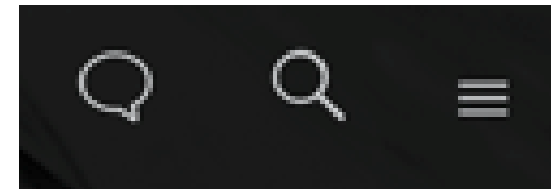
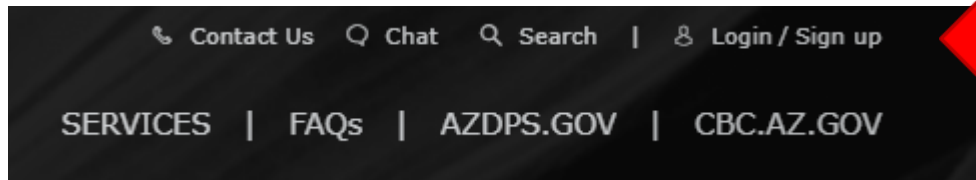
Paso 4: Programación con 'Fieldprint'

1. Inicien sesión en su Cuenta DPS

<https://psp.azdps.gov>

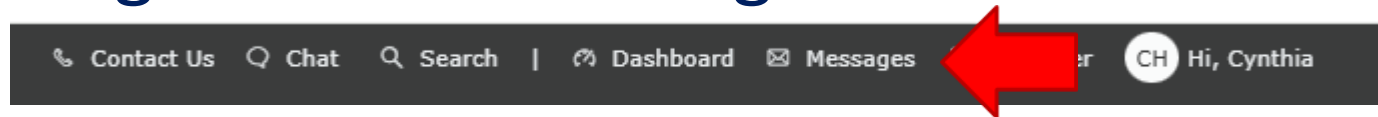


2. Hagan clic en 'Login / Sign up'

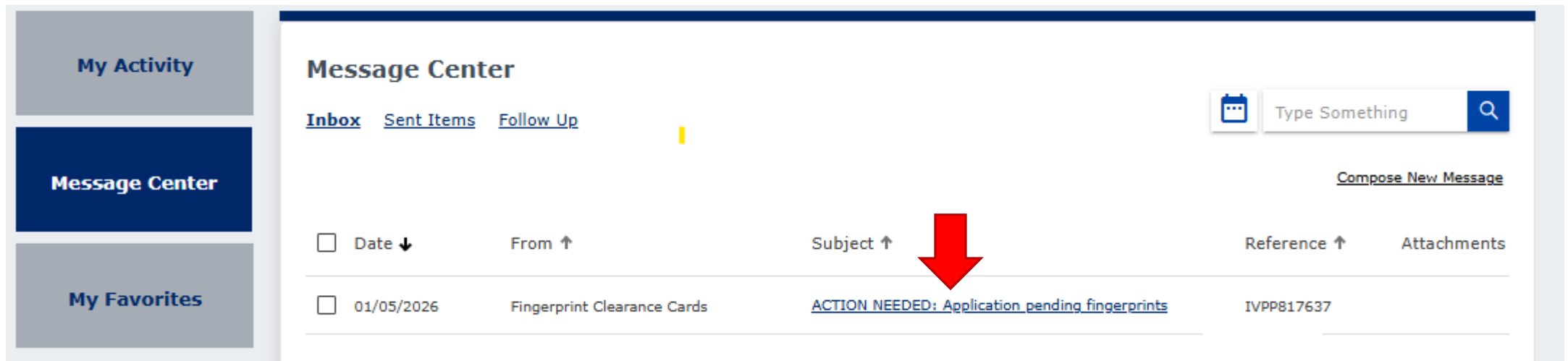


Paso 4: Programación con 'Fieldprint'

3. Hagan clic en 'messages'

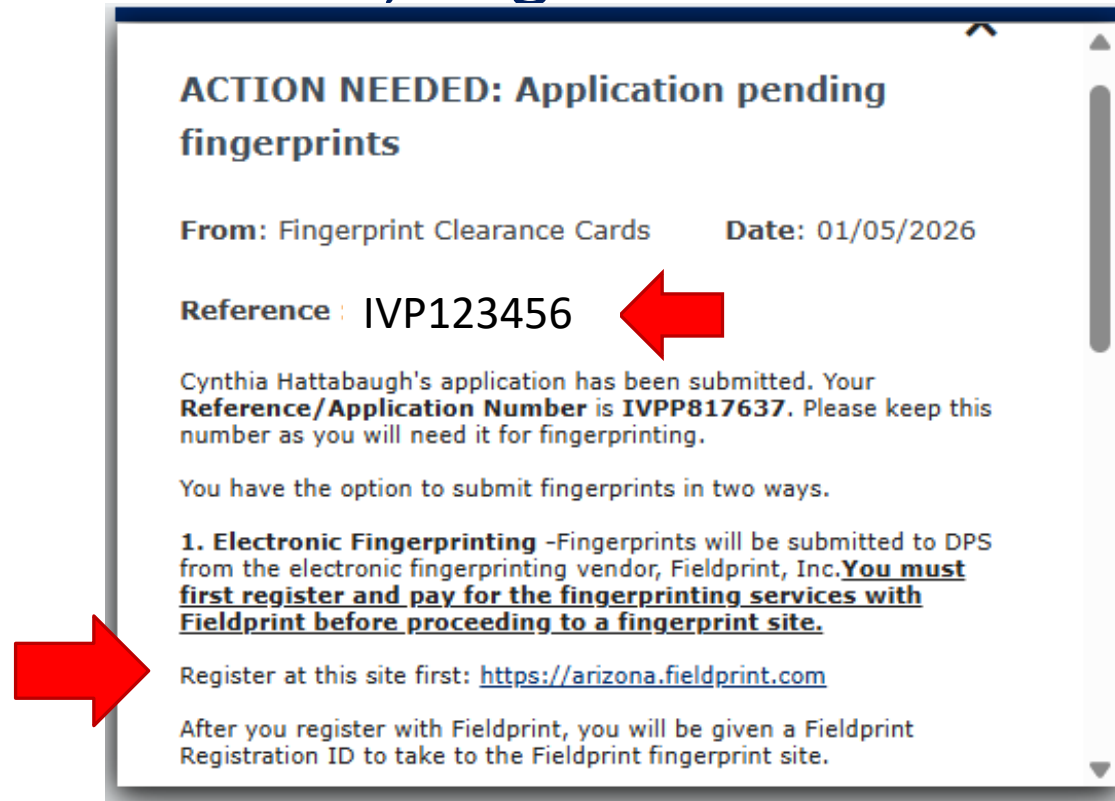


4. Desde 'Message Center', abran el mensaje 'Action Needed'



Paso 4: Programación con 'Fieldprint'

5. Anoten su número IVP, hagan clic en el enlace para agendar.



Fieldprint' necesitará su número IVP para conectar sus huellas a su aplicación IVP.

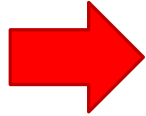


Paso 4: Agenden con 'Fieldprint'

6. Creen una cuenta de 'Fieldprint' y verifiquen por correo electrónico

Sign Up

For new users, please select "Sign Up" below to schedule a Fieldprint appointment.



Sign Up

Returning User Login

For existing users, please select "Log In" below to check appointment status, view and print receipts or reschedule an existing appointment.

Log In

Create Account

Please fill in the following fields to create an account.

* — Required Fields

Si han utilizado 'Fieldprint' antes, pueden iniciar sesión como 'returning user'



Paso 4: Agenden con 'Fieldprint'

7. Desplácese hacia abajo y seleccionen la opción 'I don't have a Fieldprint Code' y seleccionen el motivo 'Fingerprint Card'

Reason

Continue with Fieldprint Code

A Fieldprint Code is required to continue. If you don't have a Fieldprint Code, please contact the employer or organization that sent you to this website. Otherwise, enter your Fieldprint Code in the Fieldprint Code box below.

If you do not have a Fieldprint Code, leave this cell blank, scroll down to "Don't have a Fieldprint Code?" and enter the reason your fingerprinting appointment is required. You may also scroll further and select a reason from a pre-populated list by clicking "Continue with this Reason."

Fieldprint Code

Continue with Fieldprint Code

Don't have a Fieldprint Code?

Notice

If you were not issued a Fieldprint Code by your employer/agency, please enter the reason you are being fingerprinted in the blank cell below or select a reason from the list of potential options. If you do not know the reason for your fingerprinting request or it is not listed, please contact your employer/agency.

4 Total Reasons Available

Search Reasons for Fingerprint

Background Check for Employment/Licensure

Continue with this Reason

Fingerprints will be submitted to the Arizona Department of Public Safety for your fingerprint-based



Paso 6: Cita 'Fieldprint'

- Asistan a su cita 'Fieldprint'
- Traigan lo siguiente a su cita:
 - Identificación oficial con fotografía expedida por el gobierno
- Código QR de su recibo de pago de 'Fieldprint'
(enviado por correo electrónico después del pago)



Paso 7: Recibirán su Tarjeta

Una vez que se apruebe el proceso, sus Tarjetas de Autorización de Huellas Dactilares IVP se enviará por correo a su domicilio.

Envíen una copia a Recursos Humanos utilizando el código QR o haciendo clic a continuación.

[Submit IVP Card to HR](#)

[\(Enviar tarjeta IVP a RR. HH.\)](#)



THANK YOU



GRACIAS