

# INSTRUCTIONS FOR LIVE SCAN FINGERPRINTING

## Fingerprinting Process: Here's how to get started.

1. Review the list of locations that provide Live Scan Services and make an appointment if necessary. You will be charged a service fee and a DOJ processing fee. The DOJ processing fee is \$32. The service fee varies by location as indicated on the locations list.
2. Complete your Live Scan application form available from our website <https://www.sf.gov/ems>  
This form will be pre-filled with required EMSA information.
3. Arrive at the facility at your appointed time.
4. Bring the following with you to your fingerprinting appointment:
  - a. Your completed Request for Live Scan Services application,
  - b. Driver's license or other valid form of identification such as a passport or State DMV ID.
  - c. The form of payment you selected when you made your appointment.
5. The technician will scan your fingerprints and submit your data. This normally takes less than five minutes.
6. You will receive a signed receipt at the end of your fingerprinting session which can be submitted to your agency for proof of fingerprinting, if needed.
7. The results will be sent directly to the San Francisco EMSA.

## INSTRUCTIONS FOR COMPLETING THE 'REQUEST FOR LIVE SCAN' SERVICE FORM

**NAME OF APPLICANT:** Enter Full Name

**AKA's:** Enter any other names used

**DATE OF BIRTH:** Enter Date of Birth (mm/dd/yyyy)

**SEX:** Check appropriate box: Male or Female

**HEIGHT:** Enter Height: Express in Feet and Inches respectively (Do not use fractions of an inch. Example: 5' 11", 6'-01")

**WEIGHT:** Enter Weight: Express in pounds (Do not use fractions of a pound; round off to nearest pound. Example: 98 lbs, 188 lbs)

**EYE COLOR:** Enter eye color

Black	BLK	Gray	GRY	Maroon	MAR
Blue	BLU	Green	GRN	Pink	PNK
Brown	BRO	Hazel	HAZ		

**HAIR COLOR:** Enter hair color

Bald	BAL	Brown	BRO	Sandy	SDY
Black	BLK	Gray/Partially	GRY	White	WHI
Blond	BLN	Red/Auburn	RED		

**PLACE OF BIRTH:** Enter City, State and Country

**SOCIAL SECURITY NUMBER:** Enter social security number. If you do not have a social security number, leave space blank.

**CALIFORNIA'S DRIVER LICENSE:** Enter California Driver License/Identification Card Number. If you do not have a California Driver License/Identification Card Number, leave it blank.

**APPLICANT'S ADDRESS:** Enter residence address, city state and zip code.

**LEVEL OF SERVICE:** The DOJ box is pre-selected.



## REQUEST FOR LIVE SCAN SERVICE

### Applicant Submission

A1328 \_\_\_\_\_ Emergency Medical Technician/Certification  
 ORI (Code assigned by DOJ) \_\_\_\_\_ Authorized Applicant Type  
 Medical Technician  
 Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)

### Contributing Agency Information:

San Francisco Emergency Medical Services Agency \_\_\_\_\_ 04497 \_\_\_\_\_  
 Agency Authorized to Receive Criminal Record Information \_\_\_\_\_ Mail Code (five-digit code assigned by DOJ)  
 333 Valencia Street, Suite 210 \_\_\_\_\_ Camilla Arcia \_\_\_\_\_  
 Street Address or P.O. Box \_\_\_\_\_ Contact Name (mandatory for all school submissions)  
 San Francisco \_\_\_\_\_ CA \_\_\_\_\_ 94103 \_\_\_\_\_ 6282176000 \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_ Contact Telephone Number

### Applicant Information:

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Suffix \_\_\_\_\_  
 Other Name: (AKA or Alias) \_\_\_\_\_  
 Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Suffix \_\_\_\_\_  
 Sex  Male  Female  Nonbinary/Unspecified  
 Date of Birth \_\_\_\_\_ 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 \_\_\_\_\_ 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: \_\_\_\_\_ Level of Service:  DOJ  FBI  
 OCA Number (Agency Identifying Number) \_\_\_\_\_ (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: \_\_\_\_\_ Original ATI Number \_\_\_\_\_  
 (Must provide proof of rejection)

### Employer (Additional response for agencies specified by statute):

CA State Emergency Medical Services Authority \_\_\_\_\_  
 Employer Name \_\_\_\_\_  
 11120 International Drive, 2nd Floor \_\_\_\_\_ 9163224336 \_\_\_\_\_  
 Street Address or P.O. Box \_\_\_\_\_ Telephone Number (optional)  
 Rancho Cordova \_\_\_\_\_ CA \_\_\_\_\_ 95670 \_\_\_\_\_ 02531 \_\_\_\_\_  
 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 \_\_\_\_\_



### **EMT Applicant Background Check – Required Disclosures and Information**

- Please retain the original LiveScan form as you are required to submit a copy with your EMT Application.
- If you have a question about how a conviction history impacts the ability to obtain an EMT Certificate, please email [emsacertifications@sfgov.org](mailto:emsacertifications@sfgov.org).
- The EMS Agency cannot expedite processing of background checks nor provide status of your background check with the California Department of Justice (CA DOJ). For information on the status of your LiveScan, please visit: <https://applicantstatus.doj.ca.gov/>
- By submitting and completing a LiveScan, EMT Applicants are subject to a conviction history record check. Fingerprints will be retained by the CA DOJ and searched against other fingerprints on file, including latent fingerprints.
- EMT Applicants have the right to obtain a copy of their conviction history record, if any. An EMT applicant has the right to challenge the accuracy and completeness of their conviction history record, and to obtain a determination as to the validity of their record before the EMS Agency makes a final determination concerning their eligibility for adoption, employment, certification, licensing, or permitting. To request a copy of your conviction history, please email [emsacertifications@sfgov.org](mailto:emsacertifications@sfgov.org) or call 628-217-6000.

Applicants with questions or requests for additional information may reach the EMS Agency Certification Team by email at [emsacertifications@sfgov.org](mailto:emsacertifications@sfgov.org).



### Common Live Scan Errors

#### For Applicants:

- **Incomplete or Incorrect Information:**
  - Double-check all personal details on the application form, including name, date of birth, social security number, and aliases (if any). All information must match government issued photo ID submitted with application and provided to live scan technician.
- Please note:
  - Additional fees may be incurred if the live scan is incomplete or for repeat live scan submissions.

#### For Live Scan Technicians:

- Incorrect Scan Transmission:
  - Verify the fingerprint scans and applicant data are transmitted to the designated agency electronically. **"Name only" FBI searches will not be accepted.**
- Poor Fingerprint Quality:
  - Ensure proper technique is used to capture clear and complete fingerprints. Smudged, incomplete, or unclear prints may lead to submission being rejected.
- Data Entry Errors:
  - Carefully enter all applicant information into the live scan system. SSN must be entered and field not left blank –for EMT certification purposes, this field is mandatory.

#### Additional Tips:

- Review instructions with the live scan provider or requesting agency beforehand.
- If unsure about any information, clarify with the appropriate party before submission.
- Keep a copy of your completed application, live scan form, and any receipts for future reference.

By following these tips and avoiding common errors, the live scan process can be completed efficiently for both applicants and technicians.



## REQUEST FOR LIVE SCAN SERVICE

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### Privacy Notice

As Required by Civil Code § 1798.17

**Collection and Use of Personal Information.** The California Justice Information Services (CJIS) Division in the Department of Justice (DOJ) collects the information requested on this form as authorized by Business and Professions Code sections 4600-4621, 7574-7574.16, 26050-26059, 11340-11346, and 22440-22449; Penal Code sections 11100-11112, and 11077.1; Health and Safety Code sections 1522, 1416.20-1416.50, 1569.10-1569.24, 1596.80-1596.879, 1725-1742, and 18050-18055; Family Code sections 8700-87200, 8800-8823, and 8900-8925; Financial Code sections 1300-1301, 22100-22112, 17200-17215, and 28122-28124; Education Code sections 44330-44355; Welfare and Institutions Code sections 9710-9719.5, 14043-14045, 4684-4689.8, and 16500-16523.1; and other various state statutes and regulations. The CJIS Division uses this information to process requests of authorized entities that want to obtain information as to the existence and content of a record of state or federal convictions to help determine suitability for employment, or volunteer work with children, elderly, or disabled; or for adoption or purposes of a license, certification, or permit. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The DOJ's general privacy policy is available at <http://oag.ca.gov/privacy-policy>.

**Providing Personal Information.** All the personal information requested in the form must be provided. Failure to provide all the necessary information will result in delays and/or the rejection of your request.

**Access to Your Information.** You may review the records maintained by the CJIS Division in the DOJ that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

**Possible Disclosure of Personal Information.** In order to process applications pertaining to Live Scan service to help determine the suitability of a person applying for a license, employment, or a volunteer position working with children, the elderly, or the disabled, we may need to share the information you give us with authorized applicant agencies.

The information you provide may also be disclosed in the following circumstances:

- With other persons or agencies where necessary to perform their legal duties, and their use of your information is compatible and complies with state law, such as for investigations or for licensing, certification, or regulatory purposes.
- To another government agency as required by state or federal law.

**Contact Information.** For questions about this notice or access to your records, you may contact the Associate Governmental Program Analyst at the DOJ's Keeper of Records at (916) 210-3310, by email at [keeperofrecords@doj.ca.gov](mailto:keeperofrecords@doj.ca.gov), or by mail at:

Department of Justice  
Bureau of Criminal Information & Analysis  
Keeper of Records  
P.O. Box 903417  
Sacramento, CA 94203-4170



## REQUEST FOR LIVE SCAN SERVICE

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### 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.

**Principal Purpose.** Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

**Routine Uses.** During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental, or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.



## REQUEST FOR LIVE SCAN SERVICE

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### Noncriminal Justice Applicant's Privacy Rights

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification<sup>1</sup> that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.<sup>2</sup>
- If you have a criminal history record, the officials making a determination of your suitability for the employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or update of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record.<sup>3</sup>

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.<sup>4</sup>

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <https://www.fbi.gov/services/cjis/identity-history-summary-checks>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.) *You can find additional information on the FBI website at <https://www.fbi.gov/about-us/cjis/background-checks>.*

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<sup>1</sup> Written notification includes electronic notification, but excludes oral notification

<sup>2</sup> <https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement>

<sup>3</sup> See 28 CFR 50.12(b)

<sup>4</sup> See U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c)