



### REQUEST FOR LIVE SCAN SERVICE

#### Applicant Submission

A9743  
ORI (Code assigned by DOJ)

Volunteer  
Authorized Applicant Type

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - If assigned by DOJ, use exact title assigned)

#### Contributing Agency Information:

Maranatha Christian Schools  
Agency Authorized to Receive Criminal Record Information

11290  
Mail Code (five-digit code assigned by DOJ)

9050 Maranatha Drive  
Street Address or P.O. Box

Keri Quinn  
Contact Name (mandatory for all school submissions)

San Diego CA  92127  
City State ZIP Code

8587599737  
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

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 Street Address or P.O. Box

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: OCA Number (Agency Identifying Number)

Level of Service:  DOJ  FBI  
(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):

Employer Name

Street Address or P.O. Box Telephone Number (optional)

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