

STATE OF CALIFORNIA  
DEPARTMENT OF JUSTICE  
GENERIC LIVE SCAN FORM



STATE OF CALIFORNIA  
BCIA 8016  
(Rev. 05/2018)

DEPARTMENT OF JUSTICE

Applicant Submission

REQUEST FOR LIVE SCAN SERVICE

Fingerprint Applicant Submission

AG302  
ORI (Code assigned by DOJ)

Volunteer  
Authorized Applicant Type

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

Contributing Agency Information:

Windsor Unified School District  
Agency Authorized to Receive Criminal Record Information

03701  
Mail Code (five-digit code assigned by DOJ)

9291 Old Redwood Highway, Bldg #500  
Street Address or P.O. Box

Joan Robertson  
Contact Name (mandatory for all school submissions)

Windsor CA  95492  
City State ZIP Code

7078377703  
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 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:  
(Must provide proof of rejection)

Original ATI Number

Employer (Additional response for agencies specified by statute):

Employer Name

Mail Code (five digit code assigned by DOJ)

Street Address or P.O. Box

City State ZIP Code

Telephone Number (optional)

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency LSID

ATI Number Amount Collected/Billed