

## REQUEST FOR LIVE SCAN SERVICE

(Public Schools or Joint Powers Agencies)

Applicant Submission				
ORI: A0763  Code assigned by DOJ	Гуре of Applicant: ☐ Clas	sified School Employee	d School Employee	
The following selections are for	Public Schools only:			
License, Certification, Permit	Peace Officer La	w Enforcement Officer 🗵 Volunteer		
Type of License/Certification/Perm			-	
Contributing Agency Information:	(Maximul	m 30 characters - if assigned by DOJ, use exact title assigned)		
PACIFICA SCHOOL DISTRICT				
Agency Authorized to Receive Criminal Record Information		01775  Mail Code (five-digit code assigned by DOJ)		
375 REINA DEL MAR		SUZY SANTIAGO		
Street Address or P.O. Box		Contact Name (mandatory for all school submissions)		
PACIFICA CA 94044		(650) 738-6602		
City	State ZIP Code	Contact Telephone Number		
Applicant Information:				
Last Name	•	First Name	Middle Initial Si	uffix
Other Name		•		
(AKA or Alias) Last		First	Sı	uffix
Date of Birth Sex	Male Female	Delicada Licana Alumba		
Date of Birth		Driver's License Number		
Height Weight Ey	ye Color Hair Color	Billing Number		
		(Agency Billing Number)		
Diago of Pirth (State or Country)	10 10	Misc.		
Place of Birth (State or Country) Social	al Security Number	Number		
Home		(Other Identification Number)	•	
Address Street Address or P.O. Box		City	State ZIP Code	
Your Number:		Level of Service: DOJ F	ВІ	
(OCA Number (Agency Identify	ying Number)			
f re-submission, list original ATI nu Must provide proof of rejection)	ımber:	Original ATI Number		
ive Scan Transaction Completed I	Ву:			,
		교의 회사를 다시했다고요? 글리 말으셨		
lame of Operator		Date		
		연구대화됐다. 발생하다 현대 사고		
ransmitting Agency LSID		ATI Number Amoun	Amount Collected/Billed	