

REQUEST FOR LIVE SCAN SERVICE

BCII 8016 (3/07)

Applicant SubmissionORI: A2146
Code assigned by DOJType of Application: Volunteer/VCAJob Title or Type of License, Certification or Permit: Volunteer

Agency Address Set Contributing Agency:

Elk Grove Youth Baseball

Agency authorized to receive criminal history information

08195

Mail Code (five-digit code assigned by DOJ)

9918Kent Street, #4

Street No.

Street or PO Box

Contact Name (Mandatory for all school submissions)

Elk GroveCA95624

City

State

Zip Code

Contact Telephone No.

Name of Applicant:

(Please Print)

Last

First

MI

Alias: N/A

Last

N/A

First

Driver's License No: _____

Date of Birth: _____

SEX: ☐Male ☐Female ☐

Misc. No. BIL -

146559

Agency Billing Number

Height: _____

Weight: _____

Misc. Number: N/A

Home Address:

Eye Color: _____

Hair Color: _____

Street No.

Street or PO Box

Place of Birth: N/A

City

State

Zip

Social Security Number: _____

Your Number:

Cal Ripken Youth Baseball

OCA No. (Agency Identifying No.)

Level of Service:



DOJ



FBI

If resubmission, list original ATI

Number: _____

Live Scan Transaction Completed By: _____

Name of Operator

Date

Capital LiveScan

ATI No: _____

Transmitting Agency

Debit Credit Cash Billed**Walk In Service Available At**Elk Grove Mail & More
5050 Laguna Blvd
Elk Grove, CA. 95758Capital Live Scan
5706 Broadway
Sacramento ca 95820**Hours of Operation**M-F (9:00am-6:00pm) Walkins Only
Saturday (10:00am-2:00pm) Walkins Only
Phone 877-888-8802