

Live Scan Identification

Prior to rolling fingerprint impressions, it is imperative that the identity of the applicant be established. A valid photo identification must be presented by the applicant and checked closely by the certified fingerprint roller taking the fingerprint impressions. The Department of Justice requires that only current, valid, and unexpired picture identification documents be accepted as a primary valid identification.

Acceptable **primary** forms of photo identification include any of the following:

- California Driver's License
- Department of Motor Vehicles Identification Card
- Out-of-state driver's license

However, in the absence of a primary form of identification, one or more of the following **secondary** forms of identification may be accepted, **but only with two of the supplemental documents noted below:**

- State government issued Certificate of Birth
- U.S. Active Duty/Retiree/Reservist Military Identification Card (000 10-2)
- U.S. Passport
- Federal government Personal Identity Verification Card (PIV)
- Department of Defense Common Access Card
- U.S. Tribal or Bureau of Indian Affairs Identification Card
- Social Security Card
- Court Order for Name Change/Gender Change/Adoption/Divorce
- Marriage Certificate (Government issued certificate)
- U.S. Government issued Consular Report of Birth Abroad 3
- Foreign Passport with appropriate immigration document(s)
- Certificate of Citizenship (N560)
- Certificate of Naturalization (N550)
- INS I-551 Resident Alien Card issued since 1997
- INS I-688 Temporary Resident Identification Card
- INS I-688B, I-766 Employment Authorization Card

*Please Note: Secondary identification documents and forms need to be supported by at least **two** of the following **supplemental documents:***

- Utility bill (address)
- Jurisdictional voter registration card
- Vehicle registration card/title
- Paycheck stub with name/address
- Spouse/parent affidavit
- Cancelled check or bank statement
- Mortgage documents



REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

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:

City of Riverside Human Resources Department

Agency Authorized to Receive Criminal Record Information

3900 Main Street

Street Address or P.O. Box

Riverside

CA 92522

City

State ZIP Code

Mail Code (five-digit code assigned by DOJ)

Contact Name (mandatory for all school submissions)

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 146924

(Agency Billing Number)

Misc.

Number

(Other Identification Number)

Place of Birth (State or Country)

Social Security 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 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

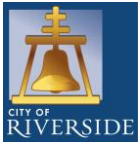
Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed



LIVE SCAN QUESTIONNAIRE

Candidate Name: _____

This questionnaire is required for all appointments, promotions, continuous class promotions, temporary appointments, volunteer/intern assignments, reinstatements and recalls to ensure that the City of Riverside has gathered all information that is collected on the current employment application. Please complete this questionnaire prior to the Live Scan process. We are unable to process your fingerprints until this form is complete.

ATTENTION: There is no time limit as to how long a conviction remains on a person's record. ALL convictions will be revealed regardless of the amount of time that has passed. Please list every conviction, including DUIs; exclude marijuana offenses as noted in question 1 below.

1. Have you been convicted of a crime?
 - Yes
 - No

If Yes: State the date of conviction, the county and state where the conviction occurred, and the nature of the offense. **The existence of a criminal record does not constitute an automatic bar to employment.** (RMC 2.36.035)

Omit (do not list) convictions more than two years old for marijuana-related violations of California Health & Safety Code Sections 11357(b), 11357(c), 11360(b), 11364, 11365, or 11550.

2. Are you currently out on bail or on your own recognizance pending trial on criminal charges?
 - Yes
 - No

If Yes: List the county and state where the pending case occurred, and the nature of the charges.

I hereby certify that all statements made on this document are true and complete to the best of my knowledge. I understand that any false statements, omissions and/or incomplete responses may lead to disqualification and/or disciplinary action, up to and including dismissal.

Candidate's Signature

Date