



## Risk Management Instructions

Risk Management is our California Department of Justice background check. This is only required of individuals 18 years of age and older. This can only be done anywhere in the State of California.

To complete this, you will need to print out our live scan form on the second page. Fill out the middle portion with your contact information. That form can then be taken to any servicer. You can do a quick google search for "*local live scan locations*" and take your form to them. The cost will range anywhere from \$15-\$30. Keep your copy of the live scan form after the service is done until you have confirmation that we have received your results. On average it takes from 1-14 days to receive the electronic results back from the Department of Justice. We will update your Cal South profile as soon as that clearance comes in.

Once you complete the service, please do the following:

- 1) With dark marker, cover up your social on the form. The servicer only needed to see this, not everyone else.
- 2) Email [livescan@calsouth.com](mailto:livescan@calsouth.com) to provide us the ATI code you were assigned. This is located in the bottom portion of the form copy they give back to you.



# REQUEST FOR LIVE SCAN SERVICE

## APPLICANT SUBMISSION

A2094	Non-Profit Organization
ORI (Code assigned by DOJ)	Authorized Applicant Type
Volunteer	
Type of License/Certification/Permit <u>OR</u> Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)	

## Contributing Agency Information

Cal South	09380	
Agency Authorized to Receive Criminal Record Information	Mail Code (five-digit code assigned by DOJ)	
1029 South Placentia Avenue	Risk Management Dept.	livescan@calsouth.com
Street Address or P.O. Box	Contact Name	Contact Email
Fullerton	(714) 451-1518	(714) 451-1017
City	Contact Telephone Number	Contact Fax Number
CA	State	ZIP Code
92831		

## Applicant Information

Last Name	First Name	Middle Name	Suffix
Other Name (AKA or Alias) Last	Other Name First	Other Name Middle	Suffix
Date of Birth	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female		
Height	Weight	Eye Color	Hair Color
Place of Birth (State or Country)	Social Security Number		
Home Address or P.O. Box	Driver's License Number		
	State		
	ZIP Code		
	Mobile Phone Number	Home Phone Number	
	Email Address		
	City	State	ZIP Code

## Live Scan Service

Level of Service:  DOJ (FBI not required)

If re-submission, list original ATI number (must provide proof of rejection): \_\_\_\_\_  
Original ATI Number

## Applicant Role(s)

Choose all that apply:

Administrator: \_\_\_\_\_ Club/League Name

Referee: \_\_\_\_\_ Referee Association or "New Referee"

## OFFICIAL USE ONLY

Live Scan Transaction Completed By:

Name of Operator	Date
Transmitting Agency	LSID
ATI Number	Amount Collected/Billed

### PRINT TWO COPIES

ORIGINAL - Live Scan Operator SECOND COPY - Applicant (please keep for your records) Please allow at least seven (7) business days for processing.