

REQUEST FOR LIVE SCAN SERVICE

(VISA/Immigration)

Applicant Submission		
AE709	VISA/IMMIGRATION	
ORI (Code assigned by DOJ)	Authorized Applicant Type	
Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if	f assigned by DOJ, use exact title assigned)	
Contributing Agency Information: DEPARTMENT OF JUSTICE	N/A	
Agency Authorized to Receive Criminal Record Information P.O. Box 160207	Mail Code (five-digit code assigned by DOJ) Applicant Program	
Street Address or P.O. Box	Contact Name (mandatory for all school submissions)	—
SACRAMENTO CA 95816-0207	916-210-4239	
City State ZIP Code	Contact Telephone Number	
Applicant Information:		
Last Name	First Name Middle Initial Su	Iffix
Other Name (AKA or Alias) Last	First Su	Iffix
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	
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	



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Privacy Notice

As Required by Civil Code § 1798.17

Collection and Use of Personal Information. The California Justice Information Services (CJIS) Division in the Department of Justice collects the information requested on this form as authorized California Penal Code section 11105(c)(9). The CJIS Division uses this information to furnish state summary criminal history information to any individual who is the subject of the record requested if needed. This is in conjunction with an application to enter the United States or any foreign nation. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The California Department of Justice's general privacy policy is available at: http://oag.ca.gov/privacy-policy.

Providing Personal Information. All the personal information requested in the form must be provided.

Access to Your Information. You may review the records maintained by the CJIS Division in the Department of Justice that contain your personal information, as permitted by the Information Practices Act. See below for contact information.

Possible Disclosure of Personal Information. In order to conduct criminal offender record information background checks for visa/immigration, we may need to share the information you give us with criminal justice and law enforcement agencies.

The information you provide may also be disclosed in the following circumstances:

- With other persons or agencies where necessary to perform their legal duties, and their use of your information is compatible and complies with state law, such as for investigations or for licensing, certification, or regulatory purposes;
- To another government agency as required by state or federal law.

Contact Information. For questions about this notice or access to your records, you may contact the Applicant Program manager by phone at (916) 210-4239, by email at <u>visa-immigration@doj.ca.gov</u>, or via mail at:

California Department of Justice Applicant Services Program ATTN: Visa-Immigration P.O. Box 160207 Sacramento, CA 95816-0207