

# REQUEST FOR LIVE SCAN SERVICE

## Applicant Submission

ORI: A0383 Type of Application: LICENSE, CERTIFICATION, PERMIT  
Code assigned by DOJ

Job Title or Type of License, Certification or Permit: PHYSICIAN & SURGEON

### Agency Address Set Contributing Agency:

MEDICAL BOARD OF CALIFORNIA  
Agency authorized to receive criminal history information

1426 HOWE AVENUE, SUITE 54  
Street No. Street or P.O. Box

SACRAMENTO CA 95825-3236  
City State Zip Code

05612  
Mail Code (five digit code assigned by DOJ)

CINDY ROGALSKI  
Contact Name (Mandatory for all school submissions)

( 916 ) 263-2369  
Contact Telephone No.

Name of Applicant: \_\_\_\_\_  
(please print) Last First MI

Alias: \_\_\_\_\_  
Last First

Driver's License No. \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex:  Male  Female

Misc. No. **BIL** - 130065  
Agency Billing Number

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Misc. No: \_\_\_\_\_

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

Home Address: \_\_\_\_\_  
Street or P.O. Box

Place of Birth: \_\_\_\_\_

City, State and Zip Code

SOC: \_\_\_\_\_

Your Number: \_\_\_\_\_  
OCA No. (Agency Identifying No.)

Level of Service  DOJ  FBI

If resubmission, list Original ATI No. \_\_\_\_\_

### Employer: (Additional response for agencies specified by statute)

Employer Name \_\_\_\_\_

Street No. Street or P.O. Box \_\_\_\_\_

Mail Code (five digit code assigned by DOJ)

City State Zip Code \_\_\_\_\_

( ) \_\_\_\_\_  
Agency Telephone No. (optional)

Live Scan Transaction Completed By: \_\_\_\_\_ Date: \_\_\_\_\_  
Name of Operator

Transmitting Agency \_\_\_\_\_ ATI No. \_\_\_\_\_ Amount Collected/Billed \_\_\_\_\_



## MEDICAL BOARD OF CALIFORNIA

LICENSING PROGRAM

1426 Howe Avenue, Suite 54

Sacramento, CA 95825-3236

(916) 263-2382 Fax: (916) 263-2487

[www.caldocinfo.ca.gov](http://www.caldocinfo.ca.gov)



## LIVE SCAN INFORMATION

California's Department of Justice (DOJ) provides statewide Live Scan, which is an electronic fingerprinting system with a subsequent automated background check and response. This system significantly expedites the fingerprint clearance process. **APPLICANTS WHO RESIDE IN CALIFORNIA MUST COMPLETE THE ELECTRONIC LIVE SCAN FINGERPRINT PROCESS.** Alternatively, applicants residing outside of California, may choose this option if visiting the state.

- **CALIFORNIA DOES NOT HAVE LIVE SCAN LINKS TO ANY OTHER STATES.**

Attached is the "Request For Live Scan Service" form that is required to have your fingerprints processed by Live Scan. Please ensure that all personal data (name, AKA's, date of birth, sex, height, weight, eyes, hair, place of birth, social security number, California driver's license number and home address) is completed. The last section of the form requires information from the fingerprint agency; please ensure this information is completed or the forms will be void. **It is the responsibility of the applicant to ensure that the person scanning the fingerprints submits TWO digital prints, one for the DOJ and one for the FBI.**

Applicants will need to access the Web site, <http://aq.ca.gov/fingerprints/publications/contact.htm> to obtain the names and location of approved fingerprint sites. Information pertaining to the need for appointments, hours of availability and rolling fees are also available through that Web site. **Applicants will need to submit the second page (Second Copy) of the three page form with the initial application, Forms L1A-L1E, to document the scanning of their fingerprints.** The results of Live Scan fingerprints are generally received within five (5) days.

If you do not reside in California, you have the option of completing the paper fingerprint cards. You may contact the Board's Consumer Information Unit at (916) 263-2382 to request the paper fingerprint cards. The results of paper fingerprint cards are generally received within twelve (12) weeks.

Whether you use Live Scan or paper fingerprint cards, you will be charged an administrative fee by the local agency which scans the prints or provides the inked impressions. This is in addition to the fingerprint processing fee which must be paid to the Medical Board of California with your application. For information about the fingerprint clearance process and time frames, please see:

<http://caaq.state.ca.us/contact/faq.htm>

Because applicants from the medical professions must be concerned with sanitary issues, they wash and scrub their hands so much that images of the fingerprints are often difficult to read. When the impressions are of such poor quality that they cannot be searched in DOJ's fingerprint data base, the fingerprints (whether Live Scan or paper card) are rejected and reprints will be necessary. Therefore, please advise the person processing your fingerprints that extra care needs to be given to ensure that clear impressions have been made.

**FINGERPRINT CLEARANCES FROM BOTH THE DOJ AND THE FBI MUST BE RECEIVED PRIOR TO THE ISSUANCE OF A PHYSICIAN'S AND SURGEON'S MEDICAL LICENSE IN CALIFORNIA.**

**Please be aware that if you have ever been convicted of a misdemeanor or felony, the record of conviction will be reported to the Board as a result of your fingerprint inquiry.**