



REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

A 9382

ORI (Code assigned by DOJ)

Tour Guide

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

New Directions Travel, Inc.

Agency Authorized to Receive Criminal Record Information

5276 Hollister Ave. Ste 207

Street Address or P.O. Box

Santa Barbara

City

CA 93111

State ZIP Code

EMPLOYMENT

Authorized Applicant Type

11080

Mail Code (five-digit code assigned by DOJ)

Danna Mead

Contact Name (mandatory for all school submissions)

(805) 967-2841

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

147827

(Agency Billing Number)

Misc. Number

(Other Identification Number)

Place of Birth (State or Country)

Social Security Number

City

State

ZIP Code

Home Address

Street Address or P.O. Box

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