Criminal History Clearance

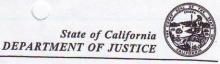
Complete the Personal Information section of the "Request for Live Scan Service" as noted in the sample below. A Request for Live Scan Service can be download from the academy website. Submit the form to the Live Scan Service of your choice. Make sure that you request a copy of the Live Scan form which you will submit to the academy as proof and verification that you completed the process.

CII 8016 (3/07)	/E SCAN SEF	RVICE		
Applicant Submission				
ORI: CA0349400		Type of Application:	TRAINING CERTIFICATION	
Code assign lob Title or Type of Lice		or Permit: P.O.S	T. CERTIFICATION (Non-sponso	ored 13511.5 PC)
Agency Address Set Contribu	uting Agency:			
DOJ/FIREARMS DIVISION Agency authorized to receive criminal history information			00000 Mail Code (five-digit code assigned by DOJ)	
		ntormation	Mail Code (live-digit code assigned by L	,00)
	ADWAY r PO Box		Contact Name (Mandatory for all school	submissions)
SACRAMENTO		95820	(916) 227-3749	
City	State	Zip Code	Contact Telephone No.	
Name of Applicant: (Please print)	Last		First	MI
	Last			
Alias:		First	Driver's License No:	
Date of Birth:	Sav	Male Fem	ale Misc. No. BIL - Non-applica	able
Date of birth.	Jex	Iviale Tell		ncy Billing Number
Height:	Weight:		Misc. Number: Non-applica	able
neight.	vvoigna _		Home Address:	
			nome Address.	
Eye Color:	Hair Color		Street No. S	treet or PO Box
Place of Birth:				
Place of Birth.			City, State and	Zip Code
Social Security Number	or:			
Your Number:	OCA No. (Agency	dentifying No.)	Level of Service: ✓ DOJ	FBI
If resubmission, list Or		dentifying (ve.)	Level of Service: V DOJ	FBI
Number:				
Employer: (Additional res	nonse for agencies s	necified by statute)		
		pecined by statute)		
DOJ/FIREARMS I	DIVISION			
Employer Name	BROADWAY		00000	
4949 Street No.	Street or PO Box		Mail Code (five digit code assigned by DOJ)	
SACRAMENTO	CA	95820	(916) 227-3749	
City	State	Zip Code	Agency Telephone No. (optional)	
Live Scan Transaction Completed By:			Name of Operator	Date

.....

Below is a SAMPLE LETTER of the Department of Justice Clearance Letter you will receive 7-10 days after you complete the Live Scan Service process. You <u>must submit</u> your letter to the Police Academy Office as soon as you receive it.

EDMUND G. BROWN Attorney General



FIREARMS DIVISION

P.O. BOX 820200 SACRAMENTO, CA 94203-0200 Public: (916) 227-3703 Facsimile: (916) 227-3700 (916) 227-3744

June 09, 2008

John Doe 2010 Apple Lane Chula Vista, CA 91910

RE: Approval of Application for Department of Justice to attend Peace Officer Standards and Training Certified Basic Course of Training.

Dear Mr. John Doe

In accordance with California Penal Code Section 13511.5, this is to certify that a search of your fingerprints in the Bureau of Criminal Identification files and a search of Department of Justice files revealed no Department of Justice record which would disqualify you from owning, possessing, or having under your control any firearm. Therefore, your request for certification to attend a basic course of training certified by the Commission on Peace Officer Standards and Training is approved.

If you have any questions, please contact the Employment & Sub-Arrest Clearance Unit at (916)227-1375.

Sincerely,

PROGRAM MANAGER

Employment & Sub-Arrest Clearance Unit

For EDMUND G. BROWN
Attorney General

Applicant Live Scan - Fingerprint Services

For a list in San Diego County/other counties https://oag.ca.gov/fingerprints/locations scrolled down to the bottom of the website and select a county to find a live scan service location near you.

This list is updated as additional information is received. However, applicants are encouraged to contact the Live Scan providers in advance to verify their current operating hours, fees, etc.

An applicant for the Requalification Course who is not sponsored by, or employed as a peace officer by a local or state agency, department or district must submit a written criminal history clearance from the Department of Justice to the training presenter

If your DOJ Clearance is not received or it is delayed, contact the Department of Justice:

For questions about this notice or access to your records, you may contact the Associate Governmental Program Analyst at the DOJ's Keeper of Records at (916) 210-3310, by email at keeperofrecords@doj.ca.gov or by mail at:

Department of Justice Bureau of Criminal Information & Analysis Keeper of Records P.O. Box 903417 Sacramento, CA 94203-4170 State of California Department of Justice



Criminal Records - Request Your Own

Home / Background Checks / Criminal Records - Request Your Own

Access to criminal history summary records maintained by the DOJ is restricted by law to legitimate law enforcement purposes and authorized applicant agencies. However, individuals have the right to request a copy of their own criminal history record from the Department to review for accuracy and completeness. Requests from third parties are not authorized and will not be processed.

Note: Criminal history records requested for an individual's own review cannot be used for Visa/Immigration or any foreign nation transactions. If you are seeking a background check for Visa/Immigration or any foreign nation transactions, see Visa/Immigration.

To receive a copy of **YOUR** criminal history record, individuals must submit fingerprint images, pay a \$25 processing fee to the DOJ, and follow the instructions below. You may be eligible to apply for a fee waiver to cover the DOJ processing fees. See Apply for a Fee Waiver.

CALIFORNIA RESIDENTS

All California Applicants must submit Live Scan fingerprints. Instructions, pdf | En Español, pdf.

- Use the Live Scan Form (Form BCIA 8016RR, pdf), (BCIA 8016RR Spanish, pdf).
- Check "Record Review" as the "Type of Application".
- Enter "Record Review" on the "Reason for Application" line.
- Fill out all your personal information.
- Take the completed form to any Live Scan site for fingerprinting services.

Fingerprinting services are available at most local police departments, sheriff's offices or any public applicant Live Scan site. To find the sites nearest to you, their fingerprint rolling fees, and acceptable methods of payment, see Public Live Scan Sites.

OUT OF STATE RESIDENTS:

Applicants Living Outside California/United States must submit manual fingerprint cards (Form FD258).

Print out the Application to Obtain copy of State Summary Criminal History Record (Form BCIA 8705, pdf) and follow the instructions on the form. A Spanish version of this form is also available (Form BCIA 8705S, pdf). Please contact your local law enforcement agency for fingerprinting services. PLEASE NOTE: Your fingerprint card must contain your full name, date of birth, sex and return mailing address. If you are having difficulty in obtaining a blank fingerprint card, please contact the Record Review Unit at (916) 227-3849.

Manual submissions must be accompanied by either personal check drawn on a U.S. bank, money order or certified check. The check or money order must be made payable to the "California Department of Justice." Mail your application, fingerprint card and processing fee to:

California Department of Justice
Bureau of Criminal Identification and Analysis
Record Review & Challenge Section
PO BOX 160207
Sacramento, CA 95816-0207

Once you have received your Record Review response, if you want to challenge the contents of your criminal record, you must complete the "Claim of Alleged Inaccuracy or Incompleteness" (form BCIA 8706), which will be included with your Record Review response if there is criminal information on your record. Mail the completed form, along with a copy of your criminal history record, to the address indicated on the form. Your challenge must specifically state the basis for the claim of inaccuracy or incompleteness and include any available proof or corroboration to substantiate your claim.

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