# Live Scan Background Check Information & Instructions

#### **BACKGROUND**

All applicants for San Mateo County EMS Agency EMT certification must submit fingerprints for a criminal history background check. This includes all initial/first-time EMT applicants and/or those whose last certification was through another county.

Live Scan background checks for EMT include California Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI). Fingerprinting is done using "Live Scan" technology and uses computer images to send fingerprints immediately to the DOJ and FBI.

All initial/first-time certification applicants, and those whose most recent certification is through another county MUST complete a DOJ and FBI Live Scan background check using the San Mateo County Live Scan Request form (see attached for form).

Live Scans completed through the DMV for ambulance drivers license, or other agencies are **NOT** accepted.

## **GETTING THE LIVE SCAN FORM**

Those applying through San Mateo County <u>MUST</u> use the San Mateo County form (attached). We recommend that applicants print three copies, one for the Live Scan agency, one to attach with your EMT application and one for your own records. The forms should be completed prior to arriving for your Live Scan appointment.

## **LIVE SCAN AGENCIES**

Live Scan requests are performed by third-party Live Scan agencies. A list of third-party providers can be found here: <a href="https://oag.ca.gov/fingerprints/locations">https://oag.ca.gov/fingerprints/locations</a>. The list includes hours of operation, cost, whether or not an appointment is necessary, and method of payment. San Mateo County EMS does <a href="https://oag.ca.gov/fingerprints/locations">NOT</a> perform Live Scan requests.

## **PRIVACY GUARANTEE**

Privacy and confidentiality of criminal history record information is the responsibility of the EMS Agency.

## **IF YOU HAVE A CONVICTION/CRIMINAL HISTORY**

Conviction of a crime does not necessarily mean that an applicant will be denied certification. The appropriate EMS staff, along with the county legal department if appropriate, will review each case where the applicant has a criminal conviction. Decisions will be based on applicable state statutes and regulations, and a careful review of documentation. If an applicant is denied, he/she has the right to request a hearing. In addition, an EMT certificate may be suspended or revoked based on criminal history information. Applicants with a criminal conviction or who are involved in an active prosecution can expect a delay in the processing of their application. For us to process your application, you must submit a letter explaining the case and copies of the final court docket/disposition which will help us in the decision process.

# Live Scan Background Check Information & Instructions

Complete the fields on the Live Scan request form as listed below. If you are using the form from our website, some of this information is already completed:

#### **APPLICANT SUBMISSION SECTION**

**ORI:** A1274

Authorized Applicant Type: Emergency Medical Technician License/Certification

**Agency Authorized to Receive:** San Mateo County EMS Agency

Mail Code (five-digit code assigned by DOJ): 04360

Street No. Street or P.O. Box: 801 Gateway Blvd., Ste. 200

Contact Name: N/A

City: South San Francisco

State: CA Zip Code: 94080

Contact Telephone Number: (650) 573-2564

### **APPLICANT INFORMATION SECTION**

Name of Applicant: Enter your last name, first name and middle initial

Other Name (AKA or Alias): Enter any other names you've used

Date of Birth: Enter your date of birth
Sex: Check the appropriate box

**Driver's License Number:**Enter your California Driver's License number

**Height:** Enter your height (feet and inches)

Weight:Enter you weightEye Color:Enter your eye colorHair Color:Enter your hair colorPlace of Birth:Enter you place of birth

Social Security Number: Enter your social security number

**Home Address:** Enter your home street address, city, state and zip

#### **EMPLOYER SECTION**

Employer Name: EMSA Mail Code: 02531

Address: 11120 International Drive, Suite 200

City: Rancho Cordova

 State:
 CA

 Zip:
 95670

**Telephone Number:** (916) 322-4336

## \*\*DO NOT COMPLETE ANY OTHER FIELDS ON THE FORM\*\*

(If the form is filled out incorrectly, DOJ may reject it, requiring the background check to be repeated, including additional fees.



Applicant Submission					
A1274			Emergency Medical Technician License/Certification		
ORI (Code assigned by DOJ)			Authorized Applicant Type		
EMT-I Certified					
Type of License/Certification/Permit OR W	orking i	TIE (Maximum 30 charact	ers - if assigned by DO	DJ, use exact title assigned)	
Contributing Agency Information:					
San Mateo County EMS Agency Agency Authorized to Receive Criminal Record Information			04360 Mail Code (five-digit code assigned by DOJ)		
801 Gateway Blvd., Suite 200			mail code (into digit code dodgited by 200)		
Street Address or P.O. Box			Contact Name (mandatory for all school submissions)		
South San Francisco CA 94080		(650) 573-2564			
City	State	ZIP Code	Contact Telephone Number		
Applicant Information:					
Last Name			First Name Middle Initial Suffix		
Other Name: (AKA or Alias)					
Last Name			First Name Suffix		
Date of Birth  Sex Male Female Nonbinary/Unspecified			Driver's License Number		
			Billing		
Height Weight Eye Co	lor	Hair Color	Number		
			(Ager Misc.	ncy Billing Number)	
Place of Birth (State or Country) Social S	Security N	lumber	Number		
Hama			(Other	er Identification Number)	
Home Address Street Address or P.O. Box			City	State ZIP Code	
		. D	D: 4.40		
i have received and read the	nciuaed	a Privacy Notice,	Privacy Act S	Statement, and Applicant's Privacy Rights.	
Applicant Signature			Date		
Your Number:  OCA Number (Agency Identifying Number)			Level of Service:   DOJ FBI  (If the Level of Service indicates FBI, the fingerprints will be used to check the criminal history record information of the FBI.)		
number:	Origin	nal ATI Number			
(Must provide proof of rejection)	!	:£:   - · · - 4 - 4 · · 4	-1.		
Employer (Additional response for age		becilied by statut	e):		
Emergency Medical Services Authority Employer Name	/				
11120 International Drive, Suite 200				+1 (916) 322-4336	
Street Address or P.O. Box			Telephone Number (optional)		
Rancho Cordova		CA	95670	02531	
City		State	ZIP Code	Mail Code (five digit code assigned by DOJ)	
Live Scan Transaction Completed By:					
Name of Operator			Date		
			Date		
Transmitting Agency LSID			ATI Number	Amount Collected/Billed	

# **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 (DOJ) collects the information requested on this form as authorized by Business and Professions Code sections 4600-4621, 7574-7574.16, 26050-26059, 11340-11346, and 22440-22449; Penal Code sections 11100-11112, and 11077.1; Health and Safety Code sections 1522, 1416.20-1416.50, 1569.10-1569.24, 1596.80-1596.879, 1725-1742, and 18050-18055; Family Code sections 8700-87200, 8800-8823, and 8900-8925; Financial Code sections 1300-1301, 22100-22112, 17200-17215, and 28122-28124; Education Code sections 44330-44355; Welfare and Institutions Code sections 9710-9719.5, 14043-14045, 4684-4689.8, and 16500-16523.1; and other various state statutes and regulations. The CJIS Division uses this information to process requests of authorized entities that want to obtain information as to the existence and content of a record of state or federal convictions to help determine suitability for employment, or volunteer work with children, elderly, or disabled; or for adoption or purposes of a license, certification, or permit. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The DOJ's general privacy policy is available at <a href="http://oag.ca.gov/privacy-policy">http://oag.ca.gov/privacy-policy</a>.

**Providing Personal Information.** All the personal information requested in the form must be provided. Failure to provide all the necessary information will result in delays and/or the rejection of your request.

**Access to Your Information.** You may review the records maintained by the CJIS Division in the DOJ 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 process applications pertaining to Live Scan service to help determine the suitability of a person applying for a license, employment, or a volunteer position working with children, the elderly, or the disabled, we may need to share the information you give us with authorized applicant 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 Associate Governmental Program Analyst at the DOJ's Keeper of Records at (916) 210-3310, by email at <a href="mailto:keeperofrecords@doj.ca.gov">keeperofrecords@doj.ca.gov</a>, or by mail at:

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

## **Privacy Act Statement**

**Authority**. The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect completion or approval of your application.

**Principal Purpose**. Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses. During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental, or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

## **Noncriminal Justice Applicant's Privacy Rights**

As an applicant who is the subject of a national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

- You must be provided written notification<sub>1</sub> that your fingerprints will be used to check the criminal history records of the FBI.
- You must be provided, and acknowledge receipt of, an adequate Privacy Act Statement when you submit your fingerprints and associated personal information. This Privacy Act Statement should explain the authority for collecting your information and how your information will be used, retained, and shared.
- If you have a criminal history record, the officials making a determination of your suitability for the employment, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.
- The officials must advise you that the procedures for obtaining a change, correction, or update of your criminal history record are set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.
- If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the officials deny you the employment, license, or other benefit based on information in the criminal history record. 3

You have the right to expect that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council. 4

If agency policy permits, the officials may provide you with a copy of your FBI criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, you may obtain a copy of the record by submitting fingerprints and a fee to the FBI. Information regarding this process may be obtained at <a href="https://www.fbi.gov/services/cjis/identity-history-summary-checks">https://www.fbi.gov/services/cjis/identity-history-summary-checks</a>.

If you decide to challenge the accuracy or completeness of your FBI criminal history record, you should send your challenge to the agency that contributed the questioned information to the FBI. Alternatively, you may send your challenge directly to the FBI. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenged entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.) You can find additional information on the FBI website at <a href="https://www.fbi.gov/about-us/cjis/background-checks">https://www.fbi.gov/about-us/cjis/background-checks</a>.

<sup>&</sup>lt;sup>1</sup> Written notification includes electronic notification, but excludes oral notification

<sup>2</sup> https://www.fbi.gov/services/cjis/compact-council/privacy-act-statement

<sup>&</sup>lt;sup>3</sup> See 28 CFR 50.12(b)

<sup>&</sup>lt;sup>4</sup> See U.S.C. 552a(b); 28 U.S.C. 534(b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV(c)