

ORJT Live Scan Instructions for Coaches & Volunteers

All ORJT coaches and applicable volunteers must complete a Live Scan background check before participating in team activities.

This packet contains two required forms:

1. CalVECHS Waiver Agreement (BCIA 9018)
2. Request for Live Scan Service (BCIA 8016VECHS)

Step 1: Complete the CalVECHS Waiver Agreement

Complete and sign the attached BCIA 9018:

- Select Yes or No regarding prior convictions or guilty pleas.
- Provide an explanation if you select Yes.
- Check Volunteer.
- Sign and date the form.
- Print your name.
- Provide your personal mailing address.
- Review the Privacy Notice on page 2.

Return the completed BCIA 9018 directly to the ORJT Secretary at: orjtsecretary@gmail.com.

Do not take this form to the Live Scan location.

This waiver is separate from the Live Scan form and must be renewed annually while you remain associated with ORJT.

Step 2: Complete the Live Scan form

Complete the Applicant Information section of the attached BCIA 8016VECHS.

Do not change the ORI, applicant type, agency information, mail code, or other information already completed by ORJT.

Please:

- Complete all fields in the Applicant Information section.
- Read the Privacy Notice, Privacy Act Statement, and Noncriminal Justice Applicant's Privacy Rights included in the packet.
- Sign and date the acknowledgment on page 1.

Step 3: Go to the Live Scan location

Bring:

- The complete four-page BCIA 8016VECHS
- A valid government-issued photo ID, such as a driver's license

Please use this location:

The UPS Store – Broadstone Plaza

2795 E. Bidwell Street, Suite 100
Folsom, CA 95630

ORJT has an account with this location, so the Live Scan fees will be billed directly to the organization. If you are billed directly, please forward your receipt to orjtsecretary@gmail.com for reimbursement.

Step 4: ORJT Will Confirm Your Clearance

You do not need to send ORJT your completed BCIA 8016VECHS. ORJT will verify completion and review your status through the DOJ portal.

Please make sure you have separately returned your completed and signed BCIA 9018 waiver to the ORJT Secretary.

You may not participate in team activities until the required background-check process has been completed and ORJT has confirmed your clearance.

Thank you for completing these requirements promptly.



CaIVECHS WAIVER AGREEMENT FOR RELEASE OF CRIMINAL OFFENDER RECORD INFORMATION

Pursuant to the Penal Code section 11105.3 and the National Child Protection Act, as amended by the Volunteers for Children Act, this form must be completed and signed by every current or prospective applicant, employee, or volunteer, for whom criminal offender record information (CORI) is requested by a qualified entity under these laws.

I hereby authorize El Dorado Hills Youth Football and Cheer dba Oak Ridge Jr. Trojans (ORJT)

Name of Qualified Entity

to submit a set of my fingerprints to the California Department of Justice for the purpose of accessing and reviewing state and federal CORI that may pertain to me. By signing this Waiver Agreement, it is my intent to authorize the dissemination of any state and federal CORI that may pertain to me to the qualified entity.

I understand that, until the CORI background check is completed, the qualified entity may choose to deny me unsupervised access to children, the elderly, or individuals with disabilities. I further understand that if the information is the basis for an adverse decision, the qualified entity will expeditiously provide me a copy of the CORI background check report, and that I am entitled to challenge the accuracy and completeness of any information contained in any such report. I may obtain a prompt determination as to the validity of my challenge before a final decision is made.

☐ Yes, I have (OR) ☐ No, I have not been convicted of or pled guilty to a crime.

If yes, please describe the crime(s) and the particulars:

I am a current or prospective: ☐ Employee ☐ Volunteer

Signature _____ Date _____

Printed Name _____

Address for receiving copy of criminal history _____

To Be Completed By Qualified Entity:

Agency Name El Dorado Hills Youth Football and Cheer

Address P.O. Box 5514, El Dorado Hills, CA 95762

Telephone 916-955-4123

Note: This document must be retained by the qualified entity for audit purposes.



CaIVECHS WAIVER AGREEMENT FOR RELEASE OF CRIMINAL OFFENDER RECORD INFORMATION

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 Penal Code section 11105.3. The CJIS Division uses this information to ensure agency compliance with United States Code, title 34, section 40102, subdivision (b). In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. DOJ'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. Failure to provide the requested personal information will prohibit the applicant from fingerprinting for the California Volunteer Employee Criminal History Service.

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

Possible Disclosure of Personal Information. To ensure agency compliance with United States Code, title 34, section 40102, subdivision (b), this information may be shared with DOJ and the Federal Bureau of Investigation in the course of a compliance audit, pursuant to title 11, California Code of Regulations, section 702 and title 28, Code of Federal Regulations, section 20.21, subdivision (f), we may need to share the information you give us with other law enforcement or regulatory agencies.

The information you provide may 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; or
- 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 Training and Administrative Support Section by phone at (916) 210-4111, by email at TASS@doj.ca.gov, or via mail at:

California Department of Justice
Authorization & Certification Program
P.O. Box 160207
Sacramento, CA 95816-0207



Print Form

Reset Form

REQUEST FOR LIVE SCAN SERVICE
(California Volunteer and Employee Criminal History Service)

Applicant Submission

A8919
ORI (Code assigned by the Department of Justice (DOJ))

VECHS/VOLUNTEER 11105.3 PC
Authorized Applicant Type

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

Contributing Agency Information:

El Dorado Hills Youth Football and Cheer
Agency Authorized to Receive Criminal Record Information

10742
Mail Code (five-digit code assigned by DOJ)

P.O. Box 5514
Street Address or P.O. Box

Marjan Phillips
Contact Name (mandatory for all school submissions)

El Dorado Hills
City

CA
State

95762
ZIP Code

(916) 955-4123
Contact Telephone Number

Applicant Information:

Last Name

First Name

Middle Initial

Suffix

Other Name: (AKA or Alias)

Last Name

First Name

Suffix

Sex ☐ Male ☐ Female

Date of Birth

Driver's License Number

Billing Number

(Agency Billing Number)

Misc. Number

(Other Identification Number)

Height

Weight

Eye Color

Hair Color

Place of Birth (State or Country)

Social Security Number

Address for Receiving Copy of Criminal History

Street Address or P.O. Box

City

State

ZIP Code

I have received and read the included Privacy Notice, Privacy Act 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.)

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

Street Address or P.O. Box

Telephone Number (optional)

City

State

ZIP Code

Mail Code (five digit code assigned by DOJ)

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed



REQUEST FOR LIVE SCAN SERVICE

Privacy Notice

As Required by Civil Code § 1798.17

Collection and Use of Personal Information. The California Justice Information Services (CJIS) Division in 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. DOJ'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. 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 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; or
- 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 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



REQUEST FOR LIVE SCAN SERVICE

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.



REQUEST FOR LIVE SCAN SERVICE

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 notification¹ 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.²
- 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 <https://www.fbi.gov/services/cjis/identity-history-summary-checks>.

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 <https://www.fbi.gov/about-us/cjis/background-checks>.*

¹ Written notification includes electronic notification, but excludes oral notification

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

³ See 28 CFR 50.12, subdivision (b)

⁴ See U.S.C. 552a, subdivision (b); 28 U.S.C. 534, subdivision (b); 34 U.S.C. § 40316 (formerly cited as 42 U.S.C. § 14616), Article IV, subdivision (c)