SUPERIOR COURT OF CALIFORNIA COUNTY OF ORANGE Self-Help Services www.occourts.org/self-help

# HOW TO REQUEST A COPY OF YOUR CRIMINAL RECORD (DEPARTMENT OF JUSTICE RAP SHEET) VIA LIVESCAN

SELF-HELP FORM PACKET



SHC-CRIM-10 (Rev. 08/06/2021)

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## Instructions on How to Get Your CA Department of Justice (DOJ) RAP Sheet and Fingerprint Live Scan

#### Step 1: Forms

Fill out the "Request for Live Scan Service" Form BCIA 8016RR (Request for Live Scan Service) and make 2 copies. You can download a copy at: <u>https://oag.ca.gov/sites/all/files/agweb/pdfs/fingerprints/forms/bcia\_8016RR.pdf</u>. This form is also available in Spanish at: <u>https://oag.ca.gov/sites/all/files/agweb/pdfs/fingerprints/forms/bcia\_8016rr-spa.pdf</u>.

#### Step 2: Fees

The DOJ charges \$25.00 for a copy of your RAP Sheet. You must also pay a separate fee for Live Scan fingerprinting.

a. You may qualify for a fee waiver for the \$25.00 DOJ filing fee, if you receive public assistance or have very low income (separate fingerprinting costs will still be collected). To apply for a fee waiver, fill out this form: <u>https://oag.ca.gov/fingerprints/record-review/fee-waiver</u>, print it out and bring it to the Live Scan fingerprinting location that you chose with a valid photo identification. The fee waiver application is also available in Spanish at: <u>https://oag.ca.gov/sites/all/files/agweb/pdfs/fingerprints/forms/bcia-8016rr-spa.pdf.</u>

#### Step 3: Fingerprints

Bring your completed "Request for Live Scan Service" form, a valid photo identification and \$25.00 fee (or fee waiver) to any of the approved Live Scan operators listed on the following website: <a href="https://oag.ca.gov/fingerprints/locations?county=Orange">https://oag.ca.gov/fingerprints/locations?county=Orange</a>. Each operator charges their own separate fingerprinting fee.

You may receive your RAP sheet in the mail within a week if there are no matching fingerprints in the DOJ database; however, if there is a match, the RAP sheet must be manually reviewed by a technician, which can take an indeterminate amount of time.

\* If you are living outside of CA, you must submit manual fingerprint cards (Form FD-258). Print out the Application to Obtain Copy of State Summary Criminal History Record at:

<u>https://oag.ca.gov/sites/all/files/agweb/pdfs/fingerprints/forms/BCIA\_8705.pdf</u> (also available in Spanish at: <u>https://oag.ca.gov/sites/all/files/agweb/pdfs/fingerprints/forms/BCIA\_8705.pdf</u>)

Please contact your local law enforcement agency for fingerprinting services. Your fingerprint card must contain your full name, date of birth, gender and return mailing address. If you are having difficulty in obtaining a blank fingerprint card, please contact the Record Review Unit of the DOJ at (916) 227-3849.

\*\* If you have a criminal record outside of CA, you will need to request an Identity History Summary from the Federal Bureau of Investigation (FBI). For more information, please visit <u>https://www.fbi.gov/services/cjis/identity-history-summary-checks</u>.







### **REQUEST FOR LIVE SCAN SERVICE**

(Record Review or Foreign Adoption)

Applicant Submission							
CA0349435 ORI (Code assigned by DOJ)	Type of Application (Check One Only) Record Review Foreign Adoption						
Reason for Application							
Contributing Agency Inform	nation:						
DEPARTMENT OF JUSTICE Agency Authorized to Receive Criminal Record Information			07041				
P.O. BOX 903417			Mail Code (five-digit code assigned by DOJ) <b>RECORD REVIEW UNIT</b> Contact Name (mandatory for all school submissions)				
Street Address or P.O. Box	CA 04203	4470		-	Ill school submissions	)	
SACRAMENTO City	CA 94203 State ZIP Coc	<b>3-4170</b> le	(916) 227-38 Contact Telepho				
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	Misc. Number (or	her Identification Nu	umber)		
Place of Birth (State or Country)	Social Security Number	Telephone Number					
Street Address or P.O. Box			City		St	ate ZIP Cod	e
Level of Service: 🔀 DC	)J Only						
If re-submission, list original A	ATI number (Must provid	e proof of r		al ATI Number			
<ul> <li>Foreign Government Embas</li> <li>Designee Do not include E</li> </ul>		-				2))	
Designee or Embassy Name							
Street Address or P.O. Box							
City	State	Country		ZIP Code	Telephone Numb	er	
Live Scan Transaction Comp	leted By:						
Name of Operator			Date				
Transmitting Agency	LSID		ATI Number		Amount Colle	ected/Billed	

#### REQUEST FOR LIVE SCAN SERVICE (Record Review or Foreign Adoption)

#### Privacy Notice

**Collection and Use of Personal Information.** The Record Review Unit in the Department of Justice collects the information requested on this form as authorized by Penal Codes 11121 and 11105(C)(12). The Record Review Unit uses this information to process applications pertaining to Live Scan service for record review or foreign adoption. In addition, any personal information collected by state agencies is subject to the limitations in the Information Practices Act and state policy. The Department of Justice's general privacy policy is available at: <u>http://oag.ca.gov/privacy-policy</u>.

Providing Personal Information. All the personal information requested in the form must be provided.

Access to Your Information. You may review the records maintained by the Record Review Unit in the Department of Justice 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 for record review or foreign adoption, we may need to share the information you give us with other government agencies.

The information you provide may also be disclosed in the following circumstances:

- In response to a Public Records Act request, as allowed by the Information Practices Act;
- To another government agency as required by state or federal law;
- In response to a court or administrative order, a subpoena, or a search warrant.

**Contact Information.** For questions about this notice or access to your records, you may contact the Record Review Unit via telephone at (916) 227-3835 or by mail at:

Department of Justice Bureau of Criminal Information & Analysis Record Review Unit P.O. Box 903417 Sacramento, CA 94203-4170