



ST BERNARD'S ACADEMY EST. 1912

Volunteer Application

Please print

First Name..... Last Name.....
Address..... City/State/Zip.....
Telephone.....

Education (highest level completed)

High School College Graduate School Technical Vocational

Work/occupation.....

List previous volunteer experience.....

Skills (List your skills and indicate proficiency level) Skilled Can Teach Amateur

1.....

2.....

Languages Fluent Read Write

1.....

2.....

Volunteer availability: (Circle all applicable)

Number of Days per week: 1 2 3 4 5

Monday Tuesday Wednesday Thursday Friday Saturday No Preference

Circle areas of interest for volunteer work:

Classroom Events Library Office Bookkeeping IT

Janitorial/Maintenance Dorm Transportation Sports

In an emergency, notify:

Name..... Telephone.....

Address.....

Volunteers hereby agree to serve any client who is assigned regardless of race, sex, creed or national origin. Volunteers may need to submit to a background check and TB test.

Signature.....

Date

Please return to: Lynn Enemark, Compliance Coordinator, St. Bernard's Academy, 222 Dollison St., Eureka CA 95501



ST BERNARD'S ACADEMY

Employee Emergency Contact Information

Name: _____
Last First MI

Address: _____
Street City State

Telephone: _____ Cell: _____

Emergency Contact: _____ Relationship: _____
Last First

Work Phone: _____ Home Phone: _____ Cell: _____

2nd Contact Name: _____ Relationship: _____
Last First

Work Phone: _____ Home Phone: _____ Cell: _____

Preferred Local Hospital: _____

Personal Physician: _____

Physician's Phone: _____

Insurance Information:

Company: _____ Group# _____ Policy# _____

Company: _____ Group# _____ Policy# _____

Comments: (Include any special medical or personal information you would want an emergency provider to know – or special contact information.)

Paycheck or personal belongings can be picked up by: _____



ST BERNARD'S ACADEMY EST. 1912

VOLUNTEER DRIVER AUTHORIZATION TO TRANSPORT STUDENTS FORM

California legislation makes automobile insurance compulsory. Please include the following: Copy of Insurance, Copy of Driver's License and Copy of Driver Record. If a volunteer or any employee for approved school activities is operating a vehicle, which is not owned by Saint Bernard's Academy, said party must hold the following coverage:

\$100,000.00/\$500,000.00 bodily injury
\$50,000.00 property damage

This will authorize _____

(Name of teacher, coach, or other volunteer driver)

to transport students participating in school trips/events.

Vehicle Information: MAKE: _____ YEAR: _____ LICENSE#: _____

THE FOLLOWING DOCUMENTATION MUST BE PROVIDED:

- Proof of insurance submitted.
- Driving Record submitted.
- Livescan submitted.
- Be at least 25 years of age. Copy of Driver's License submitted.

Please be advised of the following:

_____ I will provide the school with prompt written notice, with particulars, of any accident arising out of the use of a licensed automobile during a school-sponsored trip/event.

_____ I am aware that any damage to the volunteer's vehicle, the cost of any insurance deductible or premium adjustment as the result of an accident while the vehicle is being used for school-related business is NOT covered by Saint Bernard's Academy or any of its employees.

NOTE: A "Trip/Event Driver" is defined as any person authorized by the school who has agreed to be a driver for a certain trip/event while they are driving their own or another licensed automobile. This includes, but is not limited to: faculty, staff, parents, and volunteers.

DECLARATION TO BE SIGNED BY DRIVER

~ I declare that I hold an unrestricted driver's license and am authorized to drive in California, and my vehicle is insured by a valid automobile liability insurance policy as required by California law.

~ I declare that the vehicle described above is mechanically fit and that there are seat belts in working condition for all passengers.

Signature

Date

DECLARATION TO BE SIGNED BY OWNER (IF DRIVER DOES NOT OWN VEHICLE)

~ I declare that I have authorized _____ to drive my vehicle to transport students participating in the school trip/event on this form.

~ I declare that he/she holds an unrestricted driver's license, is authorized to drive and is insured as an operator under the vehicle's liability insurance.

~ I declare the vehicle described above is mechanically fit and that there are seat belts in working condition for all passengers.

Signature

Date

Handbook Acknowledgement

I acknowledge that I have thoroughly read the St. Bernard's Academy Coaches Handbook and fully understand the policies and terms it contains. I recognize that any infringement of this agreement may result in disciplinary action including dismissal as a coach at St. Bernard's Academy.

Print Name

Signature

Date

NCS, CIF EJECTION POLICY COACH NOTIFICATION FORM

The following is a partial summary of NCS, CIF Ejection Policy rules and minimum penalties applicable to players and coaches as adopted by the NCS Board of Managers. The Head Coach is responsible for determining the cause of ejection for any of their players or coaching staff members and is responsible for enforcement of the NCS, CIF Ejection Policy. Confusion over the cause of a player or coaching staff member's ejection shall not be the basis for allowing a player or coaching staff member to avoid the sanctions required by the NCS, CIF Ejection Policy.

1. Ejection of a player or coach from a scrimmage:

Penalty: A player or coach who is ejected from a scrimmage must complete the NFHS Sportsmanship course prior to the next contest. During a scrimmage, if more than one player or coach from a team is ejected or participates in a fight, then the team and coaches shall complete the NFHS online sportsmanship course prior to the next contest, the team shall lose one (1) practice the following week and will be put on probation for the remainder of the school year.

2. Ejection of a player from a contest:

Penalty: A player ejected from a contest for violation of a NFHS or sports governing body rule (other than assaultive behavior/fighting or leaving the bench area during a fight) shall be ineligible for the next contest (non-league, league, invitational tournament, post-season {league, section or state} playoff). A player ejected a second time under this provision shall be ineligible for the next three contests. A player ejected a third time under this provision shall be ineligible for the remainder of the season (includes post-season play). If the ejection is for unsportsmanlike conduct, the player must also complete the NFHS online Sportsmanship course.

3. Ejection of a player from a contest for gross unsportsmanlike conduct, assaultive behavior/fighting (throwing a punch; striking an opponent with fist, locked hands, forearm or elbow; kicking or kneeing; biting) or leaving the bench area:

Penalty: A player ejected from a contest for these reasons is ineligible for the school's next three contests. In unusual circumstances the NCS Commissioner may increase the suspension up to six games. In addition, these player(s) shall complete the online NFHS Sportsmanship course. The player may not participate until the course has been completed and the player has met with the school principal or his/her designee. A player ejected a second time under this provision shall be ineligible for the remainder of the season (includes post-season play).

4. Ejection of coaches, assistant coaches and/or coaching representatives for unsportsmanlike conduct as defined by a NFHS or sports governing body rule.

Penalty: A coach, assistant coach and/or coaching representative who is ejected from a contest for unsportsmanlike conduct as defined by a NFHS or sports governing body rule shall be disqualified from any coaching activities for the remainder of the day and the school's next contest (non-league, league, invitational tournament, post-season {league, section or state} playoff). The coach, assistant coach and/or coaching representative will immediately remove themselves from their coaching responsibilities in accordance with National Federation or sport governing rules for the respective sport. The coach, assistant coach and/or coaching representative must leave the vicinity of the playing area immediately and is prohibited from any contact, direct or indirect, with the team players and other team personnel during the remainder of the contest. If there is no other coaching representative who is certified by the school in accordance with CIF Bylaw 503, the contest shall be terminated and declared a forfeit. The offending coach's school will be credited with a loss and the opposing school shall be credited with a win.

The ejected coach, assistant coach and/or coaching representative will be prohibited from attending the next contest for that team or any other team in the same sport prior to serving the penalty. Coaches also must meet with their respective Athletic Director and/or School Administrator and complete the online NFHS Sportsmanship course.

A coach, assistant coach and/or coaching representative ejected a second time from a contest during one season for unsportsmanlike conduct shall be prohibited from coaching or attending the next three contests for that team. In unusual circumstances the NCS Commissioner may increase the suspension up to six contests. A coach, assistant coach and/or coaching representative ejected a third time from a contest during one season for unsportsmanlike conduct shall be prohibited from participating in the remainder of the season (includes post-season play).

A coach, assistant coach and/or coaching representative who is ejected for fighting, assaultive behavior or gross unsportsmanlike conduct shall be disqualified for the team's remaining contests for the season.

5. Before a player or coach may participate in a contest following a multiple contest disqualification, must meet with the school principal to discuss future behavioral expectations and complete the NCS Return to Competition Form.

- 6. **Illegal participation in the next contest by a player or coach ejected in a previous contest.**
Penalty: Illegal participation in the next contest after a player, coach, assistant coach and/or coaching representative has been ejected shall result in the contest being forfeited and the ineligible player, coach, assistant coach and/or coaching representative shall be ineligible for the next contest.

- 7. **When one or more players leave the bench to begin or participate in an altercation.**
Penalty: The school, league or NCS may use electronic video to identify players who have left the bench area to begin or participate in an altercation. This identification may be made after the jurisdiction of the game officials has ended. Players so identified are subject to the penalties outlined in NCS Ejection Policy. Electronic video may also be used to identify players who were erroneously identified as having left the bench area.

- 8. **When a school incurs multiple ejections in the same sport and level of competition during the same season the following is required:**
 - a. The Head Coach must meet with the Athletic Director and/or School Administrator to review the Sportsmanship guidelines in the NCS Sports & General Rulings Handbook.
 - b. The Head Coach must take the NFHS Sportsmanship course and forward the certificate of completion to the League Commissioner. Non-League Affiliate Members must send the certificate to the NCS Officials' Liaison.
 - c. The school must develop an action plan for the team regarding sportsmanship and forward the plan to the League Commissioner. Non-League Affiliate Members must send the action plan to the NCS Officials' Liaison. The plan must be submitted within five business days after notification of this requirement is sent to the school.

If a varsity level team has any further ejections during the same season of sport, the team will not be allowed to host during the NCS Championships for that sport. The NCS Commissioner has the authority pursuant to the NCS Sports & General Rulings Handbook and the NCS Board of Managers Policy Statement (g) to impose additional sanctions on the school regarding sportsmanship issues.

- 9. **Physical Assault of an Official:**
Penalty: The person alleged to have physically assaulted an official shall be ineligible to participate in or attend any contests until the investigation has been completed and the NCS Commissioner of Athletics has accepted the results and recommendation of the school's investigation.

I have been provided with a complete version of the NCS, CIF Ejection Policy. I understand that this Coach Notification Form is only a partial summary of the information contained within the NCS, CIF Ejection Policy. I also understand that there are severe consequences for coaches and team members for assaultive behavior/fighting and leaving the bench area to begin or participate in an altercation.

Coach's Signature _____ School _____

SPORT _____ Date _____ VAR ___ JV ___ F/S ___ FR ___

This signed Coach Notification Form is to be maintained at the school.

CALIFORNIA INTERSCHOLASTIC FEDERATION

Coaching Certification

- The purpose of the CIF Coaching Education Program is to enhance the experience of student-athletes by assuring that their coaches meet a minimum level of professional training. The program provides strong, pragmatic and comprehensive instruction for coaches of interscholastic athletics in California that is consistent with the highest national standards as set by the legislature, state Department of Education, California Interscholastic Federation and National Federation of State High School Associations.

The primary requirements for coaching high school sports in California are:

1. A General Coaching Education Course

The most commonly utilized courses are:

- The Fundamentals of Coaching course through the NFHS <https://nfhslearn.com/courses/61001>

OR

- CIF Coaching Principles course offered through ASEP
http://www.asep.com/courseInfo/purchase_courseinfo.cfm?courseID=227

OR

- CIF Coaching Orientation course offered in a classroom setting (contact your school AD) or online through ASEP
http://www.asep.com/courseInfo/purchase_courseinfo.cfm?CourseID=189

2. A Concussion Course

- Concussion in Sports offered through NFHS: <https://nfhslearn.com/courses/38000>
- Concussionwise offered through ASEP: http://www.asep.com/courseInfo/purchase_courseinfo.cfm?CourseID=273

3. Sudden Cardiac Arrest (SCA) Training

- NFHS offers a free course at <http://nfhslearn.com/courses/61032/sudden-cardiac-arrest>
- ASEP offers the course at http://www.asep.com/courseInfo/purchase_courseinfo.cfm?CourseID=275

SCA Signature forms for School/District's: SCA Parent/Student Review Form / Spanish Version

4. Heat Acclimatization Course (Jan. 1, 2019 State law goes into effect)

- NFHS: <https://nfhslearn.com/courses/61140/heat-illness-prevention>
- ASEP: http://www.asep.com/courseInfo/purchase_courseinfo.cfm?CourseID=274

5. First Aid and CPR Certification

Please consult your school district for this requirement.

6. Cheer coaches ONLY

- The AACCA Spirit Safety Certification course through the NFHS <https://nfhslearn.com/courses/10000/aacca-spirit-safety-certification>

The CIF recommends you consult the school district you currently work for or plan to work for before selecting or taking any certification courses as the district may have more specific and/or additional requirements (fingerprinting, TB tests, etc.).

FAQs CIF COACHING EDUCATION

Who is required to pass the Coaching Education class?

CIF Bylaw 22.B. (9) states: "Definition of a coach, paid or unpaid: Any individual that the school/district is required to approve under California Education Code 33190-33192, 45125.01 and 45125.1." Simply stated, the law applies to anyone who is required to be fingerprinted and/or is approved by their local school board/directors to have contact with students. This applies to all CIF member schools, public and private.

What Coaching Education Courses are accepted for certification?

The NFHS "Fundamentals of Coaching" Course, the ASEP "Coaching Principles" and the ASEP "CIF Coaching Orientation" courses meet California's standards for Coaching Education.

How do I get the coaches certified in my school/district?

1. Coaches can go on their own to www.nfhslearn.com and take the "Fundamentals of Coaching" course online for \$52.
2. Any representative from a school/district can also go to www.nfhslearn.com and purchase license #'s in bulk (\$52 each), for their coaches. The coaches then go online and complete the "Fundamentals of Coaching" course to become certified.
3. Human Kinetics/ASEP offers an online version of CIF/ASEP Coaching Principles and offered at http://www.asep.com/asep_content/org/CIF.cfm for \$59. The CIF will also accept the "Coaching Orientation" course offered by ASEP.
4. A Certified Instructor in the Human Kinetics/ASEP program can still order CIF/ASEP Coaching Principles packets from the CIF State Office (Call Cici Robinson @ 916-239-4477), but all purchases of CIF/NFHS Fundamentals of Coaching materials or online licenses will be made through the NFHS (www.nfhslearn.com)

We cannot always fill our coaching positions before the season. How do we get coaches certified when someone is hired at the last moment?

The CIF Bylaw and the Education Code allows for this common situation. A school/district may hire a coach that is not certified **but only for one sports season**. The coach must complete the certification before they can coach another season and/or a second sport. The State law (SB39) allows for this one sports season exception in the case of an emergency. Because there are online options for same day certification, it should be a rare situation when this exception is utilized.

If I completed and *passed* the former CIF/ASEP Coaching Education program or AACCA National Safety Certification for cheer coaches, do I have to retake the class?

At the present time, NO! If you completed the course and passed the test, you are certified and will be listed on the "Coaches Registry" database at www.asep.com or www.nfhslearn.com.

Do I have to renew my Concussion, Sudden Cardiac Arrest (SCA) and Heat Acclimatization certification?

Yes, Concussion, SCA and Heat Acclimatization course renewals are directly tied to the renewal date for your First Aid/CPR. Whenever you renew your First Aid/CPR, you should retake the concussion, SCA and Heat Illness

Diocese of Santa Rosa



Safe Environment Program User Instructions

Safe Environment & Harassment Instructions:

1. Go to <http://santarosa.CMGconnect.org> to complete your new online Safe Environment & Harassment curriculum.
2. Create a new account by completing all the boxes. This includes address, primary parish and how you participate at your parish or school. If you have done training in the past, you will login with your previous username and password. For questions, please contact your parish/school administrator.
3. Start the ***Safe Environment—Santa Rosa*** training curriculum.
4. Complete the ***2019 California Sexual Harassment Training*** for Non-Supervisors.
5. Click the “Dashboard” tab to return to the main menu at any time.
6. If you are required to have fingerprinting done, follow the instructions in your volunteer packet.



School Staff and Volunteers: Tuberculosis Risk Assessment



Job-related requirement for child care, pre-K, K-12, and community colleges

The purpose of this tool is to identify **adults** with infectious tuberculosis (TB) to prevent them from spreading TB. Use of this risk assessment is required in the California Education Code, Sections 49406 and 87408.6 and the California Health and Safety Code, Sections 1597.055 and 121525, 121545, and 121555.

The law requires that a health care provider administer this risk assessment. A health care provider, as defined for this purpose, is any organization, facility, institution or person licensed, certified or otherwise authorized or permitted by state law to deliver or furnish health services. Any person administering this risk assessment is to have training in the purpose and significance of the risk assessment and Certificate of Completion.

Name of Employee/Volunteer Assessed for TB Risk Factors: _____

Assessment Date: _____ Date of Birth: _____

History of Tuberculosis Infection or Disease (Check appropriate box below)	
<input type="checkbox"/>	<p>Yes</p> <p>If there is a <u>documented</u> history of positive TB test (infection) or TB disease, then a symptom review and chest x-ray (if none performed in previous 6 months) should be performed at initial hire by a physician, physician assistant, or nurse practitioner. Once a person has a documented positive test for TB infection that has been followed by an x-ray, and was determined to be free of infectious TB, the TB risk assessment (and repeat x-rays) is no longer required. If an employee or volunteer becomes symptomatic for TB, then he/she should seek care from his/her health care provider.</p>
<input type="checkbox"/>	<p>No (Assess for Risk Factors for Tuberculosis using box below)</p>

Risk Factors for Tuberculosis (Check appropriate boxes below)	
<p>If any of the 5 boxes below are checked, perform a Mantoux tuberculin skin test (TST) or Interferon Gamma Release Assay (IGRA). Re-testing with TST or IGRA should only be done in persons who previously tested negative, and have <u>new risk factors</u> since the last assessment. A positive TST or IGRA should be followed by a chest x-ray, and if normal, treatment for TB infection considered. (Centers for Disease Control and Prevention [CDC]. <i>Latent Tuberculosis Infection: A Guide for Primary Health Care Providers</i>. 2013)</p>	
<input type="checkbox"/>	<p>One or more signs and symptoms of TB: prolonged cough, coughing up blood, fever, night sweats, weight loss, excessive fatigue.</p> <p>Evaluate for active TB disease with a TST or IGRA, chest x-ray, symptom screen, and if indicated, sputum acid-fast bacilli (AFB) smears, cultures and nucleic acid amplification testing. A negative TST or IGRA does not rule out active TB disease.</p>
<input type="checkbox"/>	<p>Close contact to someone with infectious TB disease at any time</p>
<input type="checkbox"/>	<p>Foreign-born person from a country with an elevated TB rate</p> <p>Includes any country <u>other than</u> the United States, Canada, Australia, New Zealand, or a country in western or northern Europe. IGRA is preferred over TST for foreign-born persons.</p>
<input type="checkbox"/>	<p>Consecutive travel or residence of ≥1 month in a country with an elevated TB rate</p> <p>Includes any country <u>other than</u> the United States, Canada, Australia, New Zealand, or a country in western or northern Europe.</p>
<input type="checkbox"/>	<p>Volunteered, worked or lived in a correctional or homeless facility</p>



School Staff & Volunteers: Tuberculosis Risk Assessment User Guide



Job-related requirement for child care, pre-K, K-12, and community colleges

Background

California law requires that school staff working with children and community college students be free of infectious tuberculosis (TB). These updated laws reflect current federal Centers for Disease Control and Prevention (CDC) recommendations for targeted TB testing. Enacted laws, **AB 1667**, effective on January 1, 2015, **SB 792** on September 1, 2016, and **SB 1038** on January 1, 2017, require a tuberculosis (TB) risk assessment be administered and if risk factors are identified, a TB test and examination be performed by a health care provider to determine that the person is free of infectious tuberculosis. The use of the TB risk assessment and the Certificate of Completion, developed by the California Department of Public Health (CDPH) and California TB Controllers Association (CTCA) are also required.

AB 1667 impacted the following groups on 1/1/2015:

1. Persons employed by a K-12 school district, or employed under contract, in a certificated or classified position (California Education Code, Section 49406)
2. Persons employed, or employed under contract, by a private or parochial elementary or secondary school, or any nursery school (California Health and Safety Code, Sections 121525 and 121555).
3. Persons providing for the transportation of pupils under authorized contract in public, charter, private or parochial elementary or secondary schools (California Education Code, Section 49406 and California Health and Safety Code, Section 121525).
4. Persons volunteering with frequent or prolonged contact with pupils (California Education Code, Section 49406 and California Health and Safety Code, Section 121545).

SB 792 impacted the following group on 9/1/2016:

Persons employed as a teacher in a child care center (California Health and Safety Code Section 1597.055).

SB 1038 impacts the following group on 1/1/2017:

Persons employed by a community college district in an academic or classified position (California Education Code, Section 87408.6).

Testing for latent TB infection (LTBI)

Because an interferon gamma release assay (IGRA) blood test has increased specificity for TB infection in persons vaccinated with BCG, IGRA is preferred over the tuberculin skin test (TST) in these persons. Most persons born outside the United States have been vaccinated with BCG.

Repeat risk assessment and testing

If there is a documented history of positive TB test or TB disease, then a symptom review and chest x-ray should be performed at initial hire. Once a person has a documented positive test for TB infection that has been followed by a chest x-ray (CXR) that was determined to be free of infectious TB, the TB risk assessment (and repeat x-rays) is no longer required.

Repeat risk assessments should occur every four years (unless otherwise required) to identify any additional risk factors, and TB testing based on the results of the TB risk assessment. Re-testing should only be done in persons who previously tested negative, and have new risk factors since the last assessment.

Previous or inactive tuberculosis

Persons with a previous chest radiograph showing findings consistent with previous or inactive TB should be tested for LTBI. In addition to LTBI testing, evaluate for active TB disease.

Negative test for LTBI does not rule out TB disease

It is important to remember that a negative TST or IGRA result does not rule out active TB disease. In fact, a negative TST or IGRA in a person with active TB can be a sign of extensive disease and poor outcome.

Symptoms of TB should trigger evaluation for active TB disease

Persons with any of the following symptoms that are otherwise unexplained should be medically evaluated: cough for more than 2-3 weeks, fevers, night sweats, weight loss, hemoptysis.

TB infection treatment is recommended

Shorter regimens for treating LTBI have been shown to be as effective as 9 months of isoniazid, and are more likely to be completed. Shorter regimens are preferred in most situations. Drug-drug interactions and contact to drug resistant TB are frequent reasons these regimens cannot be used.

Please consult with your local public health department on any other recommendations and mandates that should also be considered.



Certificate of Completion Tuberculosis Risk Assessment and/or Examination

To satisfy **job-related requirements** in the California Education Code, Sections 49406 and 87408.6 and the California Health and Safety Code, Sections 1597.055, 121525, 121545 and 121555.

First and Last Name of the person assessed and/or examined:

Date of assessment and/or examination: ____mo./____day/____yr.

Date of Birth: ____mo./____day/____yr.

The above named patient has submitted to a tuberculosis risk assessment. The patient does not have risk factors, or if tuberculosis risk factors were identified, the patient has been examined and determined to be free of infectious tuberculosis.

X _____

Signature of Health Care Provider completing the risk assessment and/or examination

Please print, place label or stamp with Health Care Provider Name and Address (include Number, Street, City, State, and Zip Code):

Telephone and FAX:



REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

A5748 _____ VOLUNTEER _____
ORI (Code assigned by DOJ) Authorized Applicant Type

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

Contributing Agency Information:

Roman Catholic Bishop of Santa Rosa _____ 00758 _____
Agency Authorized to Receive Criminal Record Information Mail Code (five-digit code assigned by DOJ)

P.O. Box 1297 _____ Julie Sparacio _____
Street Address or P.O. Box Contact Name (mandatory for all school submissions)

Santa Rosa _____ CA 95402 _____ (707) 566-3308 _____
City State ZIP Code 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 _____
(Agency Billing Number)

Place of Birth (State or Country) _____ Social Security Number _____

Misc. Number _____
(Other Identification Number)

Home Address Street Address or P.O. Box _____

City _____ State _____ ZIP Code _____

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 _____

