## Sierra – Sacramento Valley Emergency Medical Services Agency



Regional Executive Director John Poland, Paramedic

**Medical Director** Troy M. Falck, MD, FACEP, FAAEM

JPA Board Chairperson
Sue Hoek, Nevada County Supervisor

Address & Contact Information 535 Menlo Drive, Suite A Rocklin, CA 95765 (916) 625-1702 info@ssvems.com www.ssvems.com

Serving Butte, Colusa, Glenn, Nevada, Placer, Shasta, Siskiyou, Sutter, Tehama, & Yuba Counties

## S-SV EMS EMT/AEMT Live Scan Instructions

- The top two sections ("Applicant Submission" and "Contributing Agency Information") of the online
  form should already be prefilled with our EMS Agency information. However, please note that this
  information may not be visible when viewing or printing the form in some web browsers. If the top
  two sections are not already filled in, you will need to manually fill in the following (bold/underlined)
  information in these sections:
  - Applicant Submission (Top Section)
    - ORI: A0518
    - Authorized Applicant Type: <u>Emerg Med Tech Lic/Cert</u>
    - Type of License/Certification/Permit Or Working Title: <u>S-SV EMS</u>
  - Contributing Agency Information (Second Section)
    - Agency Authorized to Receive Criminal Record Information: <u>Sierra-Sacramento Valley</u>
       <u>EMS Agency</u>
    - Street Address or P.O. Box: 535 Menlo Dr., Suite A
    - City: <u>Rocklin</u>State: **CA**
    - ZIP Code: 95765
    - Mail Code (five digit code assigned by DOJ): 07374
    - Contact Name: <u>John Poland</u>
    - Contact Telephone Number: 916-625-1702
  - Employer (Additional response for agencies specified by statute) (Fourth Section)
    - Employer Name: Emergency Medical Services Authority
    - Mail Code: 02531
    - Street Address or P.O. Box: 11120 International Drive, Suite 200
    - City: Rancho Cordova
    - State: <u>CA</u>
    - Zip Code: 95670
    - Telephone Number: 916-322-4336

## Sierra – Sacramento Valley Emergency Medical Services Agency

- All applicants will need to complete the requested applicant information (3<sup>rd</sup> and 4<sup>th</sup> sections):
  - Name
  - AKA or Alias (if applicable)
  - Date of Birth
  - Sex
  - o Driver's License Number
  - Height
  - Weight
  - Eye Color
  - o Hair Color
  - Place of Birth
  - Social Security Number
  - Home Address
  - o Your Number Re-enter your Social Security Number without dashes
  - Leave all other form fields blank

## (Additional Instructions/Information Continued on Page 2)

- A list of all current Live Scan service locations and hours of operations can be found on the State of California Department of Justice/Office of the Attorney General website at:
  - https://oag.ca.gov/fingerprints/locations
- Print three (3) copies of the Live Scan Form. Use only this pre-filled form provided by the S-SV EMS Agency (or manually enter the information listed on the previous page). Any incorrect information in the top two sections of the form will delay the application process:
  - Copy 1: Provide to the Live Scan operator
  - Copy 2: Retain for your records
  - o Copy 3: Submit to the S-SV EMS Agency along with your certification application
- Live Scan reports usually take between 48-72 hours to process before we receive the results.
  However, results can occasionally take longer depending on your specific situation. Certification
  applications cannot be processed until we receive the results of both the California DOJ and FBI
  Live Scan Background Checks.
- Please contact the S-SV EMS Agency at (916) 625-1702 with any questions you may have regarding the certification and/or the Live Scan process.