

LIVE SCAN INSTRUCTIONS

All of the following forms are to be completed and submitted to Human Resources on the day of the live scan appointment. Incomplete forms will not be accepted. Human resources will not print out the forms, nor allow you time to complete the forms. If paperwork is not completed at the time of the appointment, the student/instructor will have to reschedule their appointment.

1. Request for Live Scan Service
2. Employee Information Sheet
3. Candidate Conviction History Questionnaire
4. Background Investigation Policy
5. Conviction Disclosure Instructions
6. Work Status Questionnaire
7. Acknowledgement of Employee Responsibilities
8. Volunteer Assignment Agreement
9. Agreement of Understanding- Non County Workers (policies)
10. Employee Acknowledgement and Receipt of county Policy of Equity

** All of these forms are legal documents. Therefore, they must be printed on single sided, new paper (i.e. No reused, double-sided, homework paper, etc.)

Instructions for Each Form

Request for Live Scan Service

Applicant: Only complete middle section. Human Resources will need your Drivers' License or California Identification card. It will be returned to you after you have been fingerprinted. You will be photographed during this appointment.

Employee Information Sheet

Complete entire form, sign, and date.

Candidate Conviction History Questionnaire

Complete entire form, print name, sign and date.

- If you answered Yes to "have you ever been convicted of any crime by court..." complete page 2.

Background Investigation Policy

Complete entire form, print name, sign and date.

Conviction Disclosure Instructions

Complete entire form, sign, and date.

LIVE SCAN INSTRUCTIONS

Work Status Questionnaire

Complete entire form, sign, and date.

Acknowledgement of Employee Responsibilities

Complete "Employee Certification Section", sign, and date.

Volunteer Assignment Agreement

Complete only: Name (top portion), sign, and date.

Agreement of Understanding- Non County Worker

Review the LAC DPH policies and date and initial each policy. Sign and date the bottom of the form.

Employee Acknowledgement and Receipt of County Policy of Equity

Read, sign and date the Policy of Equity

- a) Department: CHS/Program
- b) Payroll Title: Students: Student PHN w/o compensation
Instructors: Volunteer worker w/o compensation
- c) Employee Number: N/A

Live Scans are done at the following location:

County of Los Angeles Department of Public Health Human Resources
5555 Ferguson Drive
Central Lobby, 2nd Floor, suite 220
Commerce, CA 9002