

Appointment Date:

Baltimore County Government Department of Recreation and Parks



Livescan Pre-Registration Application

This form is for applicants for positions as *BCRP program leaders*, *summer staff or volunteers*.

Appointment Time:

Complete this form by typing or printing legibly.								
• Bring the following documents to your appointment:								
 This livescan form Valid photo ID Ask your hiring manager about payment. 								
REASON FOR REQUEST (FOR LIVESCAN OPERATOR)								
Fingerprint Process Type: Non-Federal Applicant User Fee (NFUF)								
Request Type: B-Child Care Full Background Reason Fingerprinted: Adam Walsh Act								
ORI #: MD920523Z CRI #: MD920523Z Agency Authorization #: 9000017880								
Agency: BCRP Site: White Marsh Tiny Tots Title: Volunteer								
Type: □Program Leader □Summer Staff ⊠Volunteer								
Licensed Child Care: N/A Yes:					If "yes," also use CCA #: 110000031			
Are you approved for payment assistance? ⊠No □ Yes								
APPLICANT INFORMATION (FOR APPLICANT)								
Last Name: First Name:			Middle			Name:	•	
Social Security #:	Country	of Citizenship:	Date of Birth:			State of Birth:		
Gender:			Height: E		Eye Col	or:	Weight:	
☐Female ☐Male	· \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		ft	in.			lbs.	
Race/Ethnicity: Asian/Pacific Islander								
Street Address:	nanaci	DIACK _			Unit #:	VVIIIL	cOther	
City:			Sta	State:		ZIP C	ode:	
Phone Number:			Email .	Email Address:				
					Do you have any pending charges?			
Driver's License Number:						Yes		
Driver's License Number	•							