Excerpt from Office of Admissions
Instructions for Application for Determination of Moral Character

FINGERPRINTS

State law mandates that the State Bar of California "...require that an applicant for admission or reinstatement to the practice of law in California...be fingerprinted in order to establish the identity of the applicant and in order to determine whether the applicant or member has a record of criminal conviction...." An Application for Determination of Moral Character or Application for Extension of Determination of Moral Character will not be considered complete without the appropriately processed fingerprints.

Live Scan Processing:

- Applicants who reside in California must submit fingerprints via **Live Scan technology.** Please see **Fingerprint Instructions for California Residents**.

Fingerprint Card Processing:

- Applicants residing outside of the State of California must submit prints on **fingerprint cards (FD-258) with a Request for Exemption from Mandatory Electronic Fingerprint Submission Requirement form.** Please see Fingerprint Instructions for Out-of-State Residents.

An applicant's fingerprints will be used solely to determine whether or not the applicant has a prior criminal record. The Committee will request that the criminal justice agencies return the fingerprints of all applicants and that the agencies neither copy the fingerprints nor disseminate them to others nor use them for any other purpose. Pursuant to Business and Professions Code Section 6054, the fingerprint cards of applicants who are admitted to practice law in California are retained for the limited purpose of criminal arrest notification.

Fingerprint Instructions for California Residents (Live Scan Technology)

Live Scan technology replaces the process of recording an individual's fingerprints on fingerprint cards. With Live Scan, applicants are provided a *Request for Live Scan Service* form. The applicant is also provided a list of nearby Live Scan locations (printing providers) and must go to one of the specified locations to submit fingerprints. At these locations, a trained operator enters the information from the *Request for Live Scan Service* form into the Live Scan terminal and initiates the live scan fingerprinting process. Please see the *Request for Live Scan Service* form on page 6, and the Instructions for Completing the Request for Live Scan Service form below.

Applicants must download the form and print two additional copies. **Three (3) copies are to be taken to an agency providing Live Scan services with a valid photo identification (expired photo identification cards will not be accepted).** The Live Scan operator must complete the last section of the *Request for Live Scan Service* form on all 3 copies. The Original Copy is retained by the Live Scan operator, the Second Copy is attached to the completed Application for Determination of Moral Character or the completed Application for Extension of Determination of Moral Character and the Third Copy is to be retained by the applicant. The list of agencies providing Live Scan fingerprinting services in California may be obtained through the Office of the Attorney General-California Department of Justice website: http://ag.ca.gov/fingerprints/publications/contact.htm.

If an applicant's prints are rejected because of poor quality, the applicant will be asked to return to the original printing agency for re-printing. The applicant is to take his/her copy of the *Request for Live Scan Service* form and a copy of the rejection notice sent to him/her by the Admissions Office. The printing agency will scan new prints and forward them to the Department of Justice for processing. The "re-printing" service fee will be waived. Failure to provide the two stated documents will result in a service charge for re-printing.

Instructions for Completing the Request for Live Scan Service form

Note: The paper copy of your Application for Determination of Moral Character must be received within 90 days of the date you complete the livescan process. Otherwise, your Application for Determination of Moral Character will be considered incomplete, and you will be required to complete the fingerprint process again.

1. **Name of Applicant:** Enter full name
2. **AKA's:** Enter any other names used
3. **Date of Birth:** Enter date of birth *(mm/dd/yyyy)*
4. **Sex:** Check appropriate gender box: Male or Female
5. **Height:** Enter height; Express in Feet and Inches respectively. (Do not use fractions of an inch; round off to the nearest inch. Examples: 5'11", 6'0")
6. **Weight:** Enter weight; Express in pounds. (Do not use fractions of a pound; round off to nearest pound. Examples: 94 lbs, 186 lbs)
7. **Eye color:** Enter eye color

Black	BLK	Green	GRN
Blue	BLU	Hazel	HAZ
Brown	BRN	Maroon	MAR
Gray	GRY	Pink	PNK

Hair color: Enter hair color

Bald	BAL	Gray or Partially	GRY
Black	BLK	Red or Auburn	RED
Blond or		Sandy	SDY
Strawberry	BLN	White	WHI
Brown	BRN		

8. **Place of Birth:** Enter city, state, and country.
9. **Social Security Number:** Enter social security number. If you do not have a social security number, leave space blank.
10. **California's Driver License/Identification Card number:** Enter California Driver License/Identification Card number.
11. **Level of Service:** The DOJ box is pre-selected. Also, if you have ever lived outside of the state of California for a period of 2 years or more since age 21 you **must** select the FBI box as well.
12. **Applicant's Address:** Enter residence address, city, state and zip code.
13. **Daytime Telephone Number:** Enter daytime telephone number.
14. **If resubmission: list Original ATI No.:** Enter the original ATI number provided on the reject notification to avoid paying an additional processing fee.

REQUEST FOR LIVE SCAN SERVICE

ORI: A1104 Type of Applicant: License, Certificate or Permit

STATE BAR LICENSE 6054 BPC

Job Title of License Certification or Permit: Attorney License

Agency Address Set Contributing Agency:

State Bar of California
Office of Admissions 4th Fl.
1149 S. Hill St
Los Angeles, CA 90015

Mailing Code: A05878

Name of Applicant: _____ (please print)
Last First MI

AKA's: _____
Last First

Billing No. BIL 140031

DOB: _____ SEX: ☐ Male ☐ Female

HT: _____ WT: _____

Applicant's Address :

Eye Color: _____ Hair Color: _____

_____
Street or P.O. Box

Place of Birth: _____
(state or foreign country)

_____
City, State and Zip Code

Social Security Number: _____

California Driver's License No. _____

_____
Daytime Telephone Number

Level of Service: ☑ DOJ ☐ FBI Your Number _____
(Only Check both boxes if you lived 2 years or more outside of CA since age 21) OCA No. (Agency Identifying No.)
If resubmission, list Original ATI No. _____

Employer: (Additional response for agencies specified by statue)

State Bar of California
Employer Name

1149 S. Hill St
Street No. Street or P.O. Box

Los Angeles, CA 90015
City State Zip Code

Live Scan Transaction Completed By: _____ Date _____
Name of Operator

_____ _____ _____
Transmitting Agency ATI No. Amount Collected

Original-Live Second Copy- Requesting Agency Third Copy- Applicant

Fingerprint Instructions for Out of State Residents (Fingerprint Cards FD-258)

Effective July 1, 2005, the California Department of Justice only processes fingerprints through the Live Scan Fingerprinting System unless an exemption is granted. Since Live Scan Fingerprinting Agencies are only located in California, applicants who do not reside in California are required to submit, with their application, two fingerprint cards (on form FD-258) and a "Request for Exemption From Mandatory Electronic Fingerprint Submission Requirement" form, a copy of which is on page 8 of these instructions. At times, there are delays in processing fingerprint cards by criminal justice agencies or delays due to fingerprint card rejection by those agencies, for which the Office of Admissions does not accept responsibility. These delays may impact the time needed to process an Application. The fingerprints must be taken by a law enforcement agency (i.e. police department, sheriff's station, etc.) or by an agency that requires an applicant to provide appropriate identification. If the official taking the fingerprints has difficulty obtaining prints of acceptable quality because of the physical condition of the applicant's fingers (e.g., dermatitis, etc.), the official should be requested to explain (in writing) why the prints are the best obtainable. That explanation should accompany the fingerprint cards. Fingerprints will be forwarded to the California Department of Justice and/or FBI for a record check.

Applicants must complete identifying information required on the fingerprint cards using **only** the abbreviations listed below. Failure to provide all correct information will result in a delay in processing the application, along with the return of the fingerprint cards for completion.

HAIR COLOR		EYE COLOR		WEIGHT (WGT)	HEIGHT (HGT)	SEX	
Bald	BAL	Black	BLK	Express in pounds.	Express in Feet and Inches	Male	M
Black	BLK	Blue	BLU	(Do not use fractions;	(Do not use fractions;	Female	F
Blonde or		Brown	BRN	round off to nearest pound.)	round off to the nearest inch.)		
Strawberry	BLN	Gray	GRY				
Brown	BRN	Green	GRN	Examples: 94 lbs	Examples: 5'11"		
Gray or Partially	GRY	Hazel	HAZ	186 lbs	6'0"		
Red or Auburn	RED	Maroon	MAR		7'0"		
Sandy	SDY	Pink	PNK				
White	WHI						

The following questions are optional and do not require a response: race, citizenship, OCA number, FBI number, armed force number and miscellaneous number.

State of California

Department of Justice

REQUEST FOR EXEMPTION FROM MANDATORY ELECTRONIC FINGERPRINT SUBMISSION REQUIREMENT

BCII 9004 (3/05)

Bureau of Criminal Identification and Information
P.O. Box 903417
Sacramento, CA 94203-4170

APPLICANT INSTRUCTIONS: Please type or print clearly all information. Illegible or incomplete information may result in processing delays or denial of your request. Mail this form, together with your fingerprint card(s) (FD258), to the above address.

APPLICANT'S NAME: _____

LAST FIRST MIDDLE

APPLICANT'S ADDRESS:

_____

STREET CITY COUNTY STATE ZIP CODE

EMPLOYER OR LICENSING AGENCY:

_____

BASIS FOR EXEMPTION:

1. • • NO REGIONAL ACCESS TO FINGERPRINTING SERVICES:

   Nearest Electronic Fingerprint Site: (Refer to public sites listed on the Attorney General's website at http://ag.ca.gov/fingerprints/publications/contact.htm)

   _____

   BUSINESS NAME ADDRESS

2. • • OTHER (explain): _____

   _____

   _____

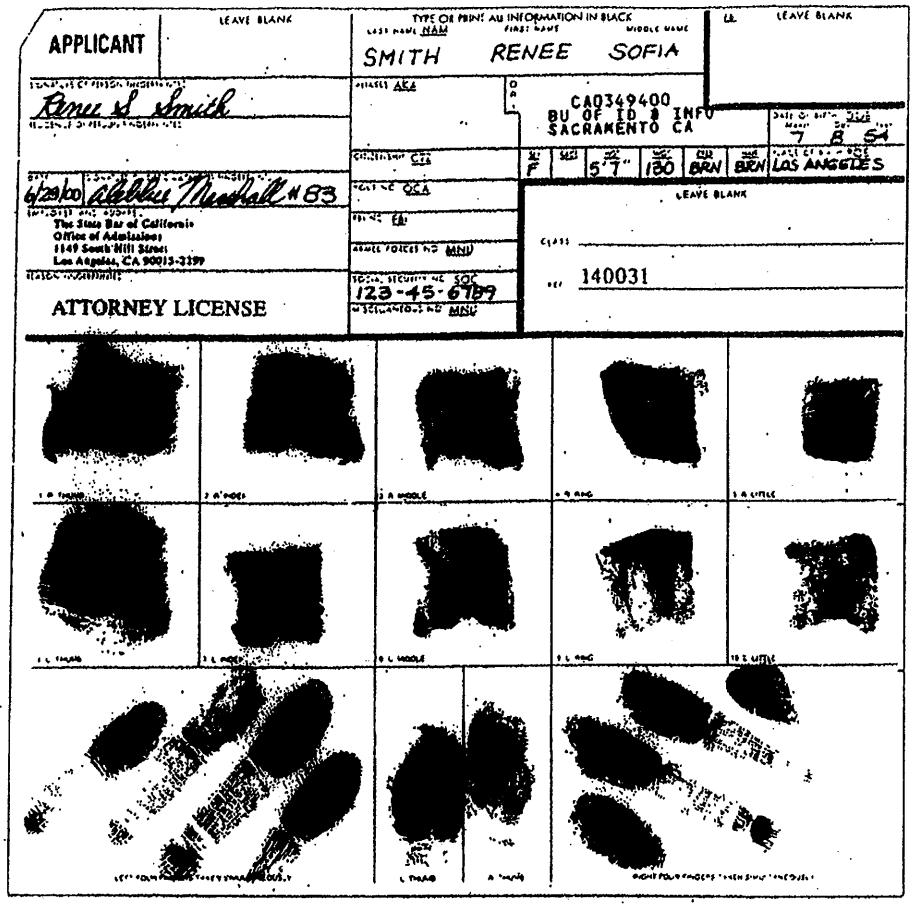
Pursuant to California Penal Code section 11077.1(b), I request an exemption from the mandatory electronic fingerprint submission requirement. I certify that the foregoing is true and correct.

_____ _____

APPLICANT'S SIGNATURE DATE

The Department of Justice will evaluate your request and determine whether adequate justification exists to accept your hard fingerprint card(s) in order to process a request for criminal offender record information for employment, licensing, certification, child placement, or adoption purposes.

Required FD-258 Form
FINGERPRINT SAMPLE



APPLICANT

LEAVE BLANK

TYPE OR PRINT ALL INFORMATION IN BLACK

LAST NAME NAM: SMITH
FIRST NAME: RENEE
MIDDLE NAME: SOFIA

LEAVE BLANK

SIGNATURE OF PERSON FINGERPRINTED: Renee S. Smith

ALIASES AKA

ORI: CA0349400 BU OF ID & INFO SACRAMENTO CA

DATE OF BIRTH: 7 8 54

CITIZENSHIP CTZ: F

SEX: F | RACE: W | HEIGHT: 5'7" | WEIGHT: 130 | EYES: BRN | HAIR: BRN | PLACE OF BIRTH: LAS ANGELES

DATE: 6/20/00

OFFICIAL TAKING FINGERPRINTS: Abbie Marshall #83

The State Bar of California
Office of Admissions
1149 South Hill Street
Los Angeles, CA 90015-2299

REASON FINGERPRINTED: ATTORNEY LICENSE

RESIDENCE OF PERSON FINGERPRINTED: OCA

FBI NO.: FBI

ARMED FORCES NO: MNU

SOCIAL SECURITY NO: SOC 123-45-6789

MISCELLANEOUS NO: MNU

LEAVE BLANK

CLASS

REF: 140031

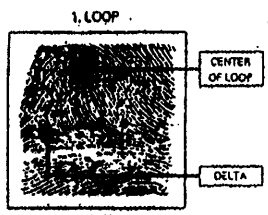
1. R. THUMB
2. R. INDEX
3. R. MIDDLE
4. R. RING
5. R. LITTLE
6. L. THUMB
7. L. INDEX
8. L. MIDDLE
9. L. RING
10. L. LITTLE

LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY
L. THUMB
R. THUMB
RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY

FEDERAL BUREAU OF INVESTIGATION
UNITED STATES DEPARTMENT OF JUSTICE
WASHINGTON, D.C. 20537

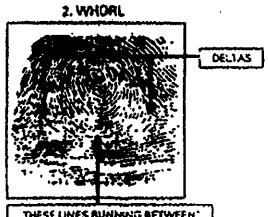
APPLICANT

1. LOOP



THE LINES BETWEEN CENTER OF LOOP AND DELTA MUST SHOW

2. WHORL



THESE LINES RUNNING BETWEEN DELTAS MUST BE CLEAR

3. ARCH

ARCHES HAVE NO DELTAS

FD-258 (REV. 12-30-82)

TO OBTAIN CLASSIFIABLE FINGERPRINTS

1. USE BLACK PRINTER'S INK
2. DISTRIBUTE INK EVENLY ON INKING SLAB
3. WASH AND DRY FINGERS THOROUGHLY
4. ROLL FINGERS FROM NAIL TO NAIL, AND AVOID ALLOWING FINGERS TO SLIP
5. BE SURE IMPRESSIONS ARE RECORDED IN CORRECT ORDER
6. IF AMPUTATION OR DEFORMITY MAKES IT IMPOSSIBLE TO PRINT A FINGER, MAKE A NOTATION TO THAT EFFECT IN THE INDIVIDUAL FINGER BLOCK
7. IF SOME PHYSICAL CONDITION MAKES IT IMPOSSIBLE TO OBTAIN PERFECT IMPRESSIONS, SUBMIT THE BEST THAT CAN BE OBTAINED WITH A MEMO STATED TO THE CARD EXPLAINING THE CIRCUMSTANCES
8. EXAMINE THE COMPLETED PRINTS TO SEE IF THEY CAN BE CLASSIFIED, BEARING IN MIND THAT MOST FINGERPRINTS FALL INTO THE PATTERNS SHOWN ON THIS CARD (OTHER PATTERNS OCCUR INFREQUENTLY AND ARE NOT SHOWN HERE)

THIS CARD FOR USE BY:

1. LAW ENFORCEMENT AGENCIES IN FINGERPRINTING APPLICANTS FOR LAW ENFORCEMENT POSITIONS
2. OFFICIALS OF STATE AND LOCAL GOVERNMENTS FOR PURPOSES OF EMPLOYMENT, LICENSING, AND PERMITS AS AUTHORIZED BY STATE STATUTES AND APPROVED BY THE ATTORNEY GENERAL OF THE UNITED STATES. (ON AN EXPIRING OR WAIVER BASIS, OFFICIALS MAY BE ASKED TO VOLUNTARILY SUBMIT FINGERPRINTS)
3. U.S. GOVERNMENT AGENCIES AND OTHER ENTITIES REQUIRED BY FEDERAL LAW
4. OFFICIALS OF FEDERALLY CHARTERED OR INSURED BANKING INSTITUTIONS TO PROMOTE OR MAINTAIN THE SECURITY OF THOSE INSTITUTIONS

LEAVE THIS SPACE BLANK

INSTRUCTIONS:

1. PRINTS MUST FIRST BE CHECKED THROUGH THE APPROPRIATE STATE IDENTIFICATION BUREAU AND ONLY THOSE FINGERPRINTS FOR WHICH NO DISQUALIFYING RECORD HAS BEEN FOUND LOCALLY SHOULD BE SUBMITTED FOR FBI SEARCH
2. PRIVACY ACT OF 1974 (P.L. 93-579) REQUIRES THAT FEDERAL, STATE, OR LOCAL AGENCIES INFORM INDIVIDUALS WHOSE SOCIAL SECURITY NUMBER IS REQUESTED WHETHER SUCH DISCLOSURE IS MANDATORY OR VOLUNTARY, BASIS OF AUTHORITY FOR SUCH SOLICITATION, AND USES WHICH WILL BE MADE OF IT
3. IDENTITY OF PRIVATE CONTRACTORS SHOULD BE SHOWN IN SPACE "EMPLOYER AND ADDRESS". THE CONTRIBUTOR IS THE NAME OF THE AGENCY SUBMITTING THE FINGERPRINT CARD TO THE FBI
4. FBI NUMBER IF KNOWN, SHOULD ALWAYS BE FURNISHED IN THE APPROPRIATE SPACE

MISCELLANEOUS NO. - RECORD OTHER ARMED FORCES NO. PASSPORT NO. (PP) ALIEN REGISTRATION NO. (AR) FOR SECURITY CARD NO. (FS) SELECTIVE SERVICE NO. (SS) VETERANS ADMINISTRATION CLAIM NO. (VA)

NOTE: In the event the official taking the fingerprints has difficulty obtaining prints of acceptable quality because of the physical condition of the applicant's fingers (e.g., dermatitis, etc.), the official should be requested to explain (in writing) why the prints are the best obtainable. That explanation should accompany the fingerprint cards.

FINGERPRINT SAMPLE