

County Executive

Ann Edwards

Deputy County Executive

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Social Services



Department of Health Services

Sandy Damiano, Interim Director

Divisions

Behavioral Health Services

Primary Health

Public Health

Departmental Administration

County of Sacramento

**INSTRUCTIONS FOR COMPLETING REQUEST FOR LIVE SCAN SERVICE
APPLICANT SUBMISSION FORM**

As authorized by Health and Safety Code Section 1797.118 all new applicants for certification as an Emergency Medical Technician (EMT) and EMTs for first time recertification within Sacramento County are required to submit fingerprints for a California Department of Justice (DOJ) criminal history check and a Federal Bureau of Investigation (FBI) criminal history check.

Download the [Request for Live Scan Service Applicant Submission form](#) from the Sacramento County EMS Agency’s (SCEMSA) website. Live Scan terminals where you can go to be fingerprinted are located in sheriffs’ offices and police departments throughout the state as well as public applicant [Live Scan locations](#). The ‘rolling fee’ for the Live Scan fingerprinting, which is separate from the non-refundable SCEMSA application fee and the non-refundable CA State EMSA EMT Central Registry fee, is paid directly to the agency conducting the Live Scan fingerprinting, and may vary by agency.

Sacramento County EMS Agency will receive the results of the criminal history check(s) electronically within 7-10 days of being fingerprinted in most cases. However, if manual processing is required, it may take longer to receive the results and in some rare cases it may take as long as 30 days or more. Applicant can check Live Scan status at [State of California DOJ](#).

IMPORTANT: Please use the SCEMSA – specific Live Scan Form on our website to take to a Live Scan location. Please complete the form completely and correctly. If the form is not completed correctly, the fingerprints may be rejected by DOJ and you will be required to have your fingerprints taken again (there should be no charges for reprinting rejected fingerprints providing you take the reject notice with you when you go to be reprinted).

- Please note: the top two sections and bottom section (“Applicant Submission”, “Contributing Agency Information”, and Employer”) of the online form is already prefilled with our EMS Agency Information.
- All applicants will need to complete the requested applicant information (3rd section)

- | | |
|-----------------|---------------|
| 1. Name | 2. Eye Color |
| 3. AKA or Alias | 4. Hair Color |

- 5. Date of Birth
- 6. Social Security Number
- 7. Sex
- 8. Home Address
- 9. Driver's License Number
- 10. Height
- 11. Weight

Leave all other form fields blank

Please contact Sacramento County EMS Agency at 916-875-9753 with any questions you may have regarding the certification and/or the Live Scan process.