DEFERRED ACTION
FOR CHILDHOOD ARRIVALS INTAKE PACKET

UCLA Student Legal Services (SLgS) is pleased to offer assistance with requests for Deferred Action for Childhood Arrivals (DACA). This intake packet is designed to help you complete your DACA request though our clinic. It contains a questionnaire, a document checklist, and a “How To” guide on getting documents you will need for your case. To qualify for DACA, you must:

- Have arrived in the United States before the age of 16;
- Have been continuously residing in the United States since June 15, 2007 and have been physically present in the United States on June 15, 2012;
- Have been 30 years old or younger on June 15, 2012;
- Entered without inspection before June 15, 2012 or your lawful immigration status expired as of June 15, 2012;
- Be currently enrolled in school, have a high school diploma or a GED, or have been honorably discharged from the U.S. Armed Forces or Coast Guard; and
- Not have convictions for a felony, a significant misdemeanor, or three or more other misdemeanors, and not otherwise pose a threat to national security or public safety.

You must pay filing fees totaling $465.00 by a money order (payable to U.S. Department of Homeland Security) when your DACA request is filed. You also must bring in two (2) passport-sized photos to include with your work permit application. If your DACA request is approved, you will receive a work permit and – barring unforeseen events that affect your eligibility for DACA – protection from deportation for a period of two years. All appointments will be held at SLgS’s office on campus. Please call the office or drop by to schedule your appointment.

UCLA Student Legal Services
A239 Murphy Hall
Box 951439
Los Angeles, CA  90095-1439
310.825.9894
Fax:  310.825.1068
slegal@saonet.ucla.edu
DEFERRED ACTION INTAKE FORM

Date ____________

POTENTIAL CLIENT INFORMATION

All of the following information will be treated as confidential – that is, it will not be disclosed to anyone outside SLgS without your permission. It will be used only to assess your eligibility for Deferred Action and, if you are eligible, to prepare your application for Deferred Action. You need to fill out pages 2-9 completely before coming to your appointment at SLgS. If you do not complete this form and bring in the documents that relate to you on pages 10 & 11 of the enclosed checklist, we will not be able to begin preparing your case. Please organize your documents in chronological order, from oldest to newest.

Complete name ________________________________

Other names used ________________________________

Address (physical) ________________________________

Address (mailing) ________________________________

Telephone        cell ___________________________ home/other____________________

Email ________________________________

Referred by (if anyone) ________________________________
BIOGRAPHICAL INFORMATION

Age________ Date of birth ______________________ 

Were you under 31 on 06/15/12?  □ Yes  □ No

Do you have a certified copy of your birth certificate?  □ Yes  □ No

If no, do you have a regular copy?  □ Yes  □ No

Do you have a passport?  □ Yes  □ No  Expiration date ___________________________

Do you have school ID(s)?  □ Yes  □ No  What years? ____________________________

Do you have any other IDs?  □ Yes  □ No  Which ones? ___________________________

Place of birth (city and country) _____________________________________________

What country are you a citizen of? ____________________________________________

Are you married?  □ Yes  □ No

If yes, please provide the name and immigration status of your spouse:

Do you have children?  □ Yes  □ No

If yes, please provide the name, age, and immigration status of each of your children:

Information about your mother (full name, location, immigration status):

Information about your father (full name, location, immigration status):

Were you ever adopted?  If so, please provide details:

Do you have a stepparent?  If so, please provide details:

Please provide information about your siblings (half siblings and step siblings included) (full names, locations, immigration statuses, and ages):
ENTRY INTO UNITED STATES

What was the date of original entry into the United States? ____________________________

What was your age at entry? ______________

How did you originally enter the United States (choose one of the following options)?

☐ With a valid visa  ☐ Without Inspection/No papers (EWI)  ☐ Visa Waiver Program
☐ Unknown  ☐ Other

What documents do you have that show your entry into the United States?

☐ I-94  ☐ Visa  ☐ Passport  ☐ Other

What other documents exist to show entry into United States before age 16?

☐ School  ☐ Medical (including vaccination)  ☐ Financial  ☐ Employment  ☐ Other (cell phone records; sports or academic club records; union records; church records, including baptism, communion, confirmation records; immigration records)

Where did you originally enter the United States (U.S. city/state, airport, or border crossing)?

What were your reasons for originally entering the United States?

Were there any unsuccessful attempts to enter the United States?  ☐ Yes  ☐ No

If yes, please provide details (such as whether the Border Patrol took your fingerprints, whether you or your parents had to sign anything, and whether you or your parents were detained):

Have you ever left the United States since your original entry?  ☐ Yes  ☐ No

If yes, please provide details (such as the date you left the U.S., the date you returned to the U.S., where you reentered the U.S., how you reentered the U.S., the countries you visited outside the U.S., and the reason for your absence from the U.S.):
**CONTINUOUS RESIDENCE IN THE UNITED STATES**

**Were you in the United States on 06/15/12?**  □ Yes  □ No

What documentation exists to prove this (financial, medical, school, employment, other)?

List all of your residences since your arrival in the United States:

<table>
<thead>
<tr>
<th>Address (include city and state)</th>
<th>From (month/year)</th>
<th>To (month/year)</th>
<th>What documentation exists to prove this? (school, medical, financial, employment, etc.)</th>
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If you left the United States at any time between June 15, 2007 and June 15, 2012, please explain why:
Please indicate which of the following apply to you:

☐ In school  ☐ Graduated from high school  ☐ Obtained GED  ☐ Honorably discharged from the military

What documents exist to prove this (diplomas, GED certificates, report cards, school transcripts, military records)?

List all the schools you have attended in the United States:

<table>
<thead>
<tr>
<th>School Name</th>
<th>City</th>
<th>State</th>
<th>Dates Attended</th>
<th>What documentation proves you went to this school? (transcripts, report cards, certificates, etc.)</th>
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When did you obtain your high school diploma or GED? __________

Are you currently enrolled at UCLA?  ☐ Yes  ☐ No

JUVENILE DELINQUENCY/CRIMINAL RECORD INFORMATION

Have you ever been arrested by law enforcement (not including immigration officers) in the United States or outside of the United States?

☐ Yes  ☐ No

Have you ever had any citations by law enforcement?  ☐ Yes  ☐ No (If no to both, skip to the next section.)
If you have ever been arrested by law enforcement, please provide details (date, court, charges sustained and dismissed, disposition, case open or closed, etc.):

Have you ever been required to spend time in juvenile hall?  
☐ Yes  ☐ No

Do you have a conviction for a felony (any crime punishable by more than a year in jail)?  
☐ Yes  ☐ No

Do you have a conviction for a misdemeanor (any crime punishable by a year or less in jail, or by no jail at all)?  
☐ Yes  ☐ No

Do you have convictions for multiple misdemeanor offenses?  
☐ Yes  ☐ No  
If yes, list the offenses and the dates of conviction.

If you answered yes to any of the above, have you ever sought post-conviction relief or do you have any documentation showing your rehabilitation or that things have changed in your life since your last arrest or conviction?

Is there any reason to believe that you pose a risk to national security?  
☐ Yes  ☐ No

If yes, please explain:

Have you engaged in or do you plan to engage in terrorist activities?  
☐ Yes  ☐ No

Are you now or have you ever been a member of a gang in the United States or abroad?  
☐ Yes  ☐ No

If yes, please explain:
IMMIGRATION HISTORY

Do you have an Alien Number (it can be found on your immigration records)? If so, please list it here: _______________________

Have you ever filed an application with the Immigration Service, or has someone filed an application on your behalf? □ Yes □ No

If yes, please explain (and indicate whether documentation of this is available):

Have you ever had a valid work permit? □ Yes □ No

Have you ever had a valid Social Security number? □ Yes □ No

Are you currently in removal proceedings? □ Yes □ No

If yes, please provide details (next court date, name of your Judge):

Have you ever been ordered deported (or ordered to depart the country voluntarily but remained in the U.S. despite the order)? □ Yes □ No

If yes, please provide details:

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WORK HISTORY

Have you ever worked in the United States? □ Yes □ No (if no, skip to the next section)

If yes, did you work with legal authorization (such as a work permit)? □ Yes □ No

Have you ever paid state or federal income taxes in the United States? □ Yes □ No

If so, in which years and to whom did you pay taxes?
List your work history in the United States (beginning with most recent employment):

<table>
<thead>
<tr>
<th>Name and Address of Employer</th>
<th>Occupation</th>
<th>Dates worked (month/year)</th>
<th>Method of Payment/Documents Used</th>
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OTHER POSSIBLE IMMIGRATION RELIEF

Are any of your relatives U.S. citizens, including your grandparents?  □ Yes  □ No

Have you ever been in foster care?  □ Yes  □ No

Are you under juvenile court jurisdiction?  □ Yes  □ No

Have you ever been abused by a U.S. citizen or lawful permanent resident spouse, parent, or stepparent?  □ Yes  □ No

Were you ever trafficked into the United States (brought to the United States and made to work against your will)?  □ Yes  □ No

If yes, please provide details:

Have you ever been the victim of a serious crime and helped law enforcement’s investigation?  □ Yes  □ No

If yes, please provide details:

Were you or your family ever persecuted in your country of birth or do you fear persecution there if you were to return?  □ Yes  □ No
If yes, please provide details:

________________________________________
CERTIFICATION

I, the undersigned, certify that the above information given for the purpose of applying for Deferred Action is true and correct to the best of my knowledge.

_____________________________  _______________________
Name (printed)  Signature

_____________________________
Date
You may not need all the materials outlined below, but you should gather as much as you can. Page 12 has more documents that you will need to gather only if they apply to you.

You must prove your identity and age (including that you were under age 31 on 06/15/12), and you should have at least one valid, government-issued photo ID for the process. You should collect all of your identity documents:

- Certified copy of your birth certificate
- Photocopy of your birth certificate (if no certified copy is available)
- Valid passport
- Expired passports
- Valid consular ID card
- Expired consular ID cards
- Valid school ID
- Expired school IDs
- Photo ID documents issued by DHS
- Any other official photo ID

You must prove you arrived in the United States before age 16, have continuously resided in the United States from 06/15/07 to the present, and evidence you were in the United States on 06/15/12. You should collect these records:

- Complete school records (cumulative transcripts should be particularly helpful)
- Medical records (including vaccination records)
- Financial records (including bank statements/checks; rent, utility or credit card bills)
- Employment records (including tax returns)
- Military records
- Other records (cell phone records; sports or academic club records; union records; church records, including baptism, communion, or confirmation records)
- Names of people who can provide declarations to support your case

You must prove you are in school, graduated from high school, have a GED, or have been honorably discharged from the military. You should collect these records:

- Diploma
- GED certificate
- Report cards
- School transcripts
- Military records
You should also gather the materials listed below IF THEY APPLY TO YOU:

If you are married:
- Certified copy of marriage certificate
- Proof of lawful immigration status of your spouse, if any

If you have children:
- Certified copy of birth certificates
- Proof of lawful immigration status of your children, if any

If you have other immediate family with lawful immigration status:
- Proof of the family relationship
- Proof of the lawful immigration status of your family member

If you have an immigration history:
- Lawful entry documents (visa, I-94 card, border crossing card)
- Immigration applications filed with DHS
- Removal proceedings documents from DHS and the immigration court
- Results of an FBI background check showing any stops at the border

If you have left the United States since 06/15/07:
- Travel documents
- Documents justifying or explaining your absences

If you have been cited or arrested as a juvenile or as an adult:
- Results of a California Department of Justice background check
- Results of an FBI background check
- Certified copies of dispositions from each citation or arrest – or proof that no charges were filed
The following information is provided to help you gather the materials listed on our Deferred Action evidence checklist. Please start requesting these materials soon, since it may take a long time to get some of them.

WHAT ARE BACKGROUND CHECKS AND HOW DO I GET THEM?

WHAT ARE BACKGROUND CHECKS?
Once you apply for Deferred Action, the U.S. Department of Homeland Security (DHS) will schedule you for “biometrics” processing. This means DHS will take your fingerprints and use them to conduct various background checks. DHS will not send the results to you. SLgS advises each person who wants to apply for Deferred Action to do his or her own background checks so that you know what information Citizenship and Immigration Services (CIS) is finding out about you. There could be errors in the background check, or you might not have known that a stop by the police was recorded as an arrest.

If the police or immigration agents have never stopped you, you may decide that you do not want to take the time or spend the money on background checks. If the police or immigration agents have stopped you, you should under no circumstances apply for Deferred Action without first obtaining your background checks and having an experienced immigration lawyer review them. Please keep in mind that it can take 60 days to obtain your background checks once you apply for them.

There are two types of background checks. The first check is an FBI check in which the FBI searches its fingerprint database to locate any arrests by police and any arrests by immigration authorities, including stops at the border. The FBI check is particularly important because it may reveal stops at the border that would not appear on a state background check, and it may even reveal the existence of a prior removal or deportation order. A state background check also searches fingerprint databases, but provides information only on arrests made by state or local police and/or criminal cases filed by state law enforcement agencies. If you were ever stopped by police in California or any other state, you need to do a California Department of Justice background check. You cannot rely on the FBI check alone, as it may not include arrests by state or local police.

WHERE CAN I GET HELP OBTAINING AN FBI BACKGROUND CHECK?

If you would like assistance obtaining an FBI background check, contact the UCPD at 310.206.8126 (ask for Tiffany). The UCPD charges $25 to make your fingerprint card and the FBI charges $18 (by cashier’s check or money order).

If you want to make the request on your own, follow the FBI website’s thorough instructions. You can find them at www.fbi.gov/about-us/cjis/background-checks/submitting-an-identification-record-request-to-the-fbi. All the information below can be found on that page, but we include a summary here for your convenience. To request an FBI background check, you must send the following items to the address listed below:
1. Signed Applicant Information Form (a completed sample is attached);
2. Fingerprint card that contains inked impressions of all of your fingerprints;
   
   **Note:** Although the fingerprint card is available for download through the FBI’s website, you can also buy a fingerprint card at a Live Scan location (see below for more information on how to find a location). Payment of $18.00 (in the form of a cashier’s check or money order payable to the Treasury of the United States; or a completed credit card form that you must download).

When you have obtained all of these items, mail them to the following address:

**FBI CJIS Division – Record Request**

1000 Custer Hollow Road

Clarksburg, WV 26306

**Note:** The Applicant Information Form you must complete and submit can be found by following the FBI link above. To get to that page, the FBI’s page asks what your purpose is in requesting the background check. Because you just want to see what comes up on your record (and are not doing the background check for employment or licensing), your reason is “to review your own record.” Do not use the word “immigration” as part of the reason for seeking the record check.

**WHERE CAN I GET HELP OBTAINING A CALIFORNIA DEPARTMENT OF JUSTICE BACKGROUND CHECK?**

The California Department of Justice requires a person who wants to obtain a background check to appear at a Live Scan site and pay a $25.00 fee to the California Department of Justice. Live Scan sites are allowed to charge an additional fee for their services. They will send your fingerprints electronically to the California Department of Justice, and the California Department of Justice will send the results to you – often in as little as a week.

For a list of Live Scan sites near you, go to http://ag.ca.gov/fingerprints/publications/contact.php and enter your address. The UCPD is a Live Scan site. To schedule an appointment, call 310.206.8126 and ask for Tiffany. You will need to bring a current government issued i.d. (e.g., passport, CA identification card, valid driver license); your Bruin Card is not acceptable.

When you appear at the Live Scan site, you will need to complete a Live Scan Service Form. On this form, you should check the box that indicates the check is being done for “personal verification” and should not say that it is for “immigration purposes.” A completed sample is attached.

**IF I HAVE BEEN ARRESTED OR CITED BY LAW ENFORCEMENT, WHAT SHOULD I DO?**

As noted above, you must get your background checks done. Also if you have appeared in a criminal court, either as an adult or as a juvenile, you should get certified copies of your court records. The procedures for adult criminal courts are different from juvenile delinquency courts in Los Angeles County. Both are addressed below.
Note: If the police arrested you but the district attorney did not file charges against you, you need proof that no charges were filed. To get this proof, contact the Los Angeles County District Attorney’s Office covering the location where the arrest happened. Request that they give you a letter showing that they did not charge you in connection with that arrest. Their office locations are found at http://da.co.la.ca.us/.

Note: If the police ticketed you for parking violations or for other vehicle violations like speeding, you may not need to provide DHS with records of these incidents. You should tell SLgS about any and all vehicle-related tickets you have received, and an attorney can let you know whether any follow-up on your part is necessary.

HOW CAN I GET COPIES OF MY ADULT CRIMINAL COURT RECORDS?

DHS will want to see what happened in any court case in which you were charged with committing a crime – even if you ultimately were not convicted. If you have ever appeared before a judge in a criminal court, you will need to get a certified copy of the court record (also called a disposition) from your case. In Los Angeles County, you should go to the clerk’s office at the Central Arraignment Court (located at 429 Bauchet Street, Los Angeles CA 90012) and ask for a certified copy of your final court disposition. The clerk will charge you 50 cents per page plus $25.00 for the certification for each of your convictions. The court is open Monday through Friday (except court holidays) from 8:30 AM to 4:30 PM. You can also call the clerk’s office for more information at (213) 974-6068, Monday through Friday from 8:30 AM to 10:30 AM and from 1:30 PM to 3:30 PM. If your criminal case took place in another county, contact that county’s court and ask the clerk how to obtain a certified copy of your disposition.

Note: If you have an outstanding warrant, going to court to get your criminal records might lead to your arrest. Consult with a criminal defense attorney if you have concerns about this.

HOW CAN I GET COPIES OF MY JUVENILE DELINQUENCY RECORDS?

On August 3, 2012, the Department of Homeland Security announced that juvenile delinquency convictions will not automatically disqualify potential applicants. The applications of persons with juvenile convictions will be considered on a case-by-case basis to determine whether favorable discretion is warranted. If you were cited or arrested for offenses you committed before you turned 18 years old – and you were not tried as an adult – you should complete your background checks as outlined above. You can then consult with SLgS about whether and how you should obtain copies of your juvenile delinquency records, which are treated as confidential under California law.

HOW DO I GET COPIES OF MY SCHOOL RECORDS?

It is important for you to get complete, accurate school records to submit to the DHS in support of your Deferred Action request. These records can prove a variety of key things – including that you came to the United States before the age of 16, that you have been continuously residing here since 06/15/07, that you were present in the United States on 06/15/12, and that you are now either in school or have obtained a high school diploma or GED.
To get an official copy of your UCLA transcript, you should contact the Registrar’s office in 1113 Murphy Hall. You also can request transcripts through URSA.

Follow the instructions below to get your school records if you attended the Los Angeles Unified School District (LAUSD). If you attended school in a different district, please contact that district for information on how to get your records.

If you are no longer attending LAUSD, contact the school you last attended in LAUSD and find out if your complete school records are there. A school contact list is available at http://transcripts.lausd.net/. If the records are there, you should submit a formal request to the school for your records. You can use the attached sample letter for a youth over the age of 18 for such a request. If the records are not there, you should get your records from the Student Records Center (SRC). (Note that if you left LAUSD before 1990, ask the school to provide you with your Record or Index Number. You will need that at the SRC.)

If LAUSD is holding your records at the SRC, please follow the instructions at http://transcripts.lausd.net/ to get a copy. You must complete the Official Transcript Request Form, available there. A sample is attached. You must also get a money order payable to LAUSD for the fees outlined on that form. To get your records as quickly as possible, we recommend that you: (1) pay the $35.00 extra for the Express Mail Service; and (2) hand deliver your form and fee to the SRC drop box at 2151 North Soto Street, Los Angeles CA 90032 between 8:00 AM and 3:00 PM, Monday through Friday.

**HOW DO I GET A CERTIFIED COPY OF MY BIRTH CERTIFICATE, OR A PASSPORT OR CONSULAR ID CARD?**

You will need to give DHS a copy of your birth certificate when you apply for Deferred Action. If you do not have an original or certified copy of your birth certificate, you should go to the consulate of your country of birth. The consulate should be able to tell you how to get a certified copy of your birth certificate – and might even be able to make the request for you. Although you should start your search by contacting your consulate, you might also need to contact a civil registry in your country of birth. Again, your consulate should be able to tell you whether this is even necessary, and if so, how to contact the appropriate civil registry office. In addition, some private businesses near your consulate may be able to get your birth certificate quickly for a fee.

You probably will not need a valid passport or consular ID to apply for Deferred Action, but you should still consider getting one. It could be another way to prove your age – and to prove your identity at your biometrics appointment. You should be able to get a passport or consular ID from the consulate of your country of birth. Most consulates require that you bring a certified copy of your birth certificate to get a passport or consular ID. They may also require other documents (like birth or marriage records for your parents, your school records if you attended school in that country, or baptismal records) and if you are under 18, your parents may need to be involved in your request.

**Note:** The exact procedures and costs for obtaining a certified copy of your birth certificate, a passport, or a consular ID will vary depending on the country in question. Start by visiting your consulate’s website to see what services it offers, what the exact procedures are, and whether you can get more information from the consulate by going there in person.
TIPS ON GATHERING OTHER DOCUMENTS

Below are some tips on how to get other documentation you may need for your Deferred Action application.

MEDICAL RECORDS

Tip: State and federal privacy laws prevent most medical service providers from freely disclosing medical records. Contact the medical records unit at the hospital or doctor’s office that served you for more information on the procedure you should use to obtain your records. A sample medical records request is attached; it shows you what the request that you would be filling out might look like.

RECORDS OF MARRIAGES AND BIRTHS IN THE UNITED STATES

Tip: In California, the easiest way to obtain birth and marriage records is by going to the County Recorder’s Office for the county where the birth or marriage took place. Most counties charge a small fee for issuing a certified copy of either of these records. Information on the Los Angeles County Recorder’s Office is at http://www.lavote.net/recorder/bdm_records.cfm.

You can also try contacting the California Department of Public Health Vital Records (CDPHVR). CDPHVR maintains birth records for the entire state, and currently processes requests for certified copies of birth certificates in four weeks. Be aware, though, that there is a six-month gap between a birth and when CDPHVR receives a record of that birth from the County Recorder’s Office. Also, CDPHVR issues certified copies of marriage certificates only for marriages before 1987 and marriages in 1998 or 1999. For more information about CDPHVR, including information about fees and processing times, go to www.cdph.ca.gov/certlic/birthdeathmar/Pages/default.aspx.

IMMIGRATION RECORDS

Tip: Obtaining your immigration records from DHS or from the Executive Office for Immigration Review (EOIR, also known as immigration court) can take a very long time and might pose some risk to you. If you believe that DHS or EOIR has records about you, speak to SLgS before making this type of request to the government.
APPLICANT INFORMATION FORM

PRIVACY ACT STATEMENT
The FBI’s acquisition, retention, and sharing of information submitted on this form is generally authorized under 28 USC 554 and 28 CFR 16.30-16.34. The purpose for requesting this information from you is to provide the FBI with a minimum of identifying data to permit an accurate and timely search of criminal history identification records. Providing this information (including your Social Security Account Number) is voluntary; however, failure to provide the information may affect the completion of your request. The information reported on this form may be disclosed pursuant to your consent, and may also be disclosed by the FBI without your consent pursuant to the Privacy Act of 1974 and all applicable routine uses. Under the Paperwork Reduction Act, you are not required to complete this form unless it contains a valid OMB control number. The form takes approximately 3 minutes to complete.

Applicant Information * Denotes Required Fields

*Last Name  Doe
*First Name   John
Middle Name 1
Middle Name 2
*Date of Birth 01/01/1990
Last Four Digits of Social Security Number

Applicant Home Address

*Address  111 North Road
*City  Los Angeles
*Postal (Zip) Code  90031
*State  CA
*Country  U.S.A.

Phone Number  (213) 123-4567
E-Mail  john doe@gmail.com

U.S. Citizen or Legal Permanent Resident  Yes  No
Country of Citizenship:  
Country of Residence:

Mail Results to Address

C/O  
Address  111 North Road
City  Los Angeles  State  CA
Postal (Zip) Code  90031  Country  U.S.A.

Phone Number (if different from above)

Payment Enclosed (please check appropriate box)  
☐ CASHIER’S CHECK  ☐ MONEY ORDER  ☐ CREDIT CARD FORM

Number of Copies 1  X $18 per Copy = Total Payment of  $18.00 Enclosed

Reason for Request  To Review Own Records

*APPLICANT SIGNATURE  DATE

You may request a copy of your own identification record to review it or obtain a change, correction, or an update to the record.
REQUEST FOR LIVE SCAN SERVICE
(Record Review or Foreign Adoption)

**Applicant Submission**

CA0349435 Type of Application (Check One Only) [✓] Record Review [ ] Foreign Adoption

**Contributing Agency Information:**

**DEPARTMENT OF JUSTICE**
Agency Authorized to Receive Criminal Record Information
P.O. BOX 903417
Street Address of P.O. Box
SACRAMENTO CA 94203-4170
City State ZIP Code

07041 Mail Code (five digit code assigned by DOJ)

**RECORD REVIEW UNIT**
Contact Name (mandatory for all school submissions)
(916) 227-3849 Contact Telephone Number

**Applicant Information:**

John First Name [ ] Middle Initial [ ] Suffix

[ ] First [ ] Suffix

Sex [✓] Male [ ] Female

Driver's License Number

01/01/1990 Date of Birth

200 Height

BROWN Eye Color BROWN Hair Color

MISC. Number (Other Identification Number)

Place of Birth (State or Country) Social Security Number

111 North Road Telephone Number
Street Address of P.O. Box

Los Angeles CA 90031
City State ZIP Code

**Level of Service:** [✓] DOJ Only

If re-submission, list original ATI number (Must provide proof of rejection):

[ ] Original ATI Number

**Foreign Government Embassy:** (MANDATORY FOR FOREIGN ADOPTION REQUESTS ONLY)

Embassy Name

Street Address of P.O. Box

City State Country ZIP Code Embassy Telephone Number (optional)

**Live Scan Transaction Completed By:**

Name of Operator

Date

Transmitting Agency LSID ATI Number Amount Collected/Billed

ORIGINAL - Live Scan Operator SECOND COPY - Applicant
REQUEST FOR RECORDS

Date:__/__/__
Principal: ____________________________ School: ____________________________
Address: ____________________________

Re: Request for Records

Student name: ____________________________ D.O.B:__/__/__

☑ Special Education Student (check the box)

Dear Principal:

I am over the age of 18 and am writing to request a copy of the following school records:

- Cumulative Transcript;
- Grades/Progress Reports; and
- Copies of Enrollment History.

As you are aware, I am able to make this request because state and federal law allows me to access my records if I am over 18. See, e.g., FERPA, 20 U.S.C. § 1232(g) and 34 C.F.R. § 99.10 (discussing access to records generally).

Please arrange for me to receive a copy of these records by: ☐ Fax to (___) ___________ or ☐ Mail to ____________________________ or ☐ Pickup on__/__/__.

Thank you in advance for your prompt attention to this request. If you have any questions, please feel free to call me at (___) ___________.

Sincerely,

______________________________  ____________________________
Signature                            Print Name
**Official Transcript Request Form**

**Los Angeles Unified School District**

**Student Records Center**

**Official Transcript Request Form**

<table>
<thead>
<tr>
<th>Enter Record or Index Number (provided by school)</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of School Contact</td>
<td>Jane Roe</td>
</tr>
<tr>
<td>Telephone Number of School Contact</td>
<td>(213) 987 - 6543</td>
</tr>
</tbody>
</table>

1. **Name (Current):**
   - Last: Doe
   - First: John
   - Middle: 

2. **Name Used in School (if different from Current Name in Section 1):**
   - Last: 
   - First: 
   - Middle: 

3. **Current Address:**
   - Number and Street: 111 North Road
   - City: Los Angeles
   - State: CA
   - Zip Code: 90031

4. **Telephone Number:**
   - (213) 123 - 4567

5. **Email Address:**
   - johndoe@gmail.com

6. **Driver's License #:**
   - N/A

7. **Date of Birth:** MM/DD/YYYY
   - 01/12/1988

8. **Year Graduated or Last Year Attended:** (YYYY)
   - 2006

9. **Name of LAUSD School Last Attended:**
   - Sonia Sotomayor Learning Academy LA River School

10. **Send Transcript To (if different than Current Address in Section 3):**
    - Attention: 
    - City: 
    - State: 
    - Zip Code: 

11. **Type of Records Requested (Indicate Quantity & Total Cost):**
    - **Name of Institution:**
      - **Transcript Type:**
        - Official High School Transcript: $15.00
        - Proof of Graduation Letter: $10.00
        - Cal Grant GPA Verification: $13.00
      - **Quantity:**
        - 1
        - 1
        - 1
      - **Cost:**
        - $15.00
        - $10.00
        - $13.00
    - **Name of Institution:**
      - **Transcript Type:**
        - Complete Set of Transcripts: $20.00
        - Attorney Request: $25.00
        - High School Diploma Reprint Only: $30.00
        - High School Diploma Reprint with Cover: $45.00
      - **Quantity:**
        - 1
        - 1
        - 1
      - **Cost:**
        - $20.00
        - $25.00
        - $30.00
    - **Name of Institution:**
      - **Transcript Type:**
        - Archival Search Report (with mail to NA Penal Facility): $50.00
      - **Quantity:**
        - 1
      - **Cost:**
        - $50.00
    - **Name of Institution:**
      - **Transcript Type:**
        - Apostille Service: $10.00
        - International Mail Service: $25.00
        - Express Mail Service: $35.00
      - **Quantity:**
        - 1
        - 1
      - **Cost:**
        - $10.00
        - $25.00
        - $35.00

12. **Authorization for Release**
    - The below signature authorizes the release of my student transcripts and confirms I have completed all sections accurately and truthfully. I understand that an incomplete form will not be processed and will be considered closed after expiration of the 30 day notification window.

   **Signature**
   - 
   - Date: 

**Office Use Only**

- **Verified Driver's License or State Identification Card Information:**
  - Is Authorization to Release Student Records Required? Yes [ ] No [ ] N/A [ ]
- **Payment Type:**
  - Cash (Apostille requests only) [ ] Money Order [ ]
  - Amount Paid: $ 

**Processed By:**
- DATE RECEIVED: 

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1 Notification regarding incompleteness of Official Transcript Request Form is sent via email unless a self-addressed envelope is provided.

2 State Identification Card may be substituted for Driver's License.

3 Diplomas Reprints are processed by an out-of-state vendor. Processing time for reprint requests is 3 to 10 weeks.

4 Cash is accepted for Apostille customers only.
Sample medical records request

Kaiser PERMANENTE
Kaiser Foundation Hospitals
The Permanente Medical Group, Inc.

REQUEST FOR ACCESS TO OR
COPIES OF MEDICAL RECORDS
(This is not to be used as a HIPAA Authorization)

1. This request is made pursuant to California Statute, Health and Safety Code sections 123100-123149. Under these sections I understand that the health care provider (hospital or medical group) is entitled to "payment of reasonable clerical costs incurred in locating and making the records available" before access to the records is permitted. If copies are requested, I acknowledge that the law requires me to pay reasonable clerical costs and permits copying fees of 25¢ cents per page after 5 pages, plus postage for mailing copies.

2. I understand that the provider has 5 working days, after receiving this request, in which to produce the requested medical records for examination. If I have requested copies, the provider has 15 calendar days, after receiving this request, during which to assemble the records and make copies in the requested format.

3. I understand that records of mental health care or alcohol or drug abuse treatment may not be disclosed to me directly if the health care provider determines that to do so would present a risk of significant adverse or detrimental consequences. I understand that the provider may provide me with a summary of the requested records instead of copying or providing the original records for examination. I understand that I may designate a physician, licensed psychologist, or clinical social worker to review the record on my behalf.

4. I understand that if I am a parent making a request regarding records of a minor, I will not be shown entries for health care to which, by law, the minor may consent without parental involvement.

5. I understand that if I am a minor, I will be given access only to those portions of my record describing health care for which I may consent, under applicable law, without involvement of parents.

6. The undersigned patient or patient's legal representative hereby requests access to the Medical Records of:

   John Doe [Adult] [Minor]

   Los Angeles Medical Center

7. Medical Center/Facility locations for which I am requesting records:

8. I am requesting: [ ] Access to the record above (no fee) [ ] Paper copies made of the record indicated

   [ ] Mail (postage fees charged) [ ] Electronic release [ ] CD

   [ ] Fax up to 10 pages to this number: ___________________________

9. For the purpose of:

   [ ] Personal use

10. Check the box(es) to specify which type of information is being requested:

    [ ] Medical [ ] Mental Health [ ] Drug/Alcohol [ ] HIV test results

   For the period May 2003 to present

   The record information being requested is (check all that apply):

   [ ] Office Visits [ ] Lab/Pathology [ ] Medications
   [ ] Obstetrics/Gynecology [ ] Physical Therapy Notes [ ] Radiology
   [ ] Ophthalmology [ ] Emergencies [ ] History and Physical
   [ ] Test Results (EMG, EEG, Sleep, Stress, Bone) [ ] Laboratory
   [ ] Notes (All, I.e., Doctor, Nurse, Procedure)

   Initial OK to leave message: 213-03-4567

   Patient Representative Signature: ____________________________

   Phone: ____________________________ Date: 7/17/02

   Address: 111 North Road
             Los Angeles, CA 90031

   Date of Birth: ____________________________

   Relationship: ____________________________ State: CA

   Applicant: ____________________________ Zip: 90031

   9222-000 REV. 12-05 FOR SPANISH USE ONLY. CHINESE 002

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