



# Omak Police Department

8 N. Ash, P.O. Box 569, Omak, WA 98841 • (509) 826-0383 • FAX 826-0116

LARRY W. SCHRECKENGAST  
Chief of Police

## APPLICATION FOR FINGERPRINTS For SCHOOL Employees

Name \_\_\_\_\_ Phone \_\_\_\_\_  
(Last Name, First Name, Middle Initial)

Physical Address \_\_\_\_\_ Town & Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ Town & Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Aliases (Maiden Name) \_\_\_\_\_

Height \_\_\_\_\_ Weight \_\_\_\_\_ Hair \_\_\_\_\_ Eyes \_\_\_\_\_

Social Security Number \_\_\_\_\_ Job Title \_\_\_\_\_

### There are two separate fees for fingerprinting:

- \_\_\_\_\_ 1. \$46.25 personal check or money order made out to OSPI
- \_\_\_\_\_ 2. \$11 cash or personal check for Omak Police Department

### School district or agency you want to receive your fingerprint information:

(Fingerprints will not be processed for school employees without this information)

School District \_\_\_\_\_

Mailing Address \_\_\_\_\_

Town & Zip Code \_\_\_\_\_

\_\_\_\_ This is for Certification with the Superintendent of Public Instruction.

Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date Printed/FAXED  
Effective 10/2010