



OREGON STATE  
BOARD LICENSED SOCIAL WORKERS  
3218 Pringle Road S.E., Suite #240  
Salem, OR 97302-6310  
(503) 378-5735 www.oregon.gov/BLSW

## FINGERPRINT ID FORM & INSTRUCTIONS

The Oregon State Board of Licensed Social Workers (Board) is the health regulatory agency responsible for licensing, and disciplining regulated social workers in Oregon. The Board requires a criminal background check on all applicants for licensure and certification. The criminal background check is conducted through the Oregon State Police by the submission of legible fingerprints from applicants.

### INSTRUCTIONS FOR APPLICANT:

1. Your fingerprints can be taken at any facility that offers this service, such as the state police, any sheriff's department or any public fingerprinting agency. **Please be prepared that most agencies charge an additional fee for providing fingerprint services, which is an additional cost to the \$50.00 the Board requires for processing.**
2. You will need to take this ID form, the Live Scan Transmission Form, your check for \$50.00 payable to the Board of Licensed Social Workers, and the self-addressed envelope to the facility where your fingerprints will be taken.
3. Once your fingerprints have been obtained, insert this completed ID form, the fingerprint card and your \$50.00 payment into the envelope, and **have the person who obtained your fingerprints seal and sign the back of the envelope.** If you utilized Live Scan services to obtain your fingerprints, please submit only your \$50.00 payment to the board office.
4. Please mail your completed fingerprint packet to the Board of Licensed Social Workers at 3218 Pringle Road S.E., Suite #240, Salem, OR 97302-6310.

### INSTRUCTIONS FOR FINGERPRINTING OFFICIAL:

1. Please use an original FD-258 Form to obtain the applicant's fingerprints. If you do not have this form, the applicant will need to request the fingerprint packet from the Board office. You may use the Live Scan Transmission Form if this service is available.
2. Please verify the applicant's identity through government issued photo identification and complete the bottom portion of this form.
3. After the applicant has placed the necessary information into the envelope, please seal and sign the back of the envelope and return the envelope to the applicant. The applicant will submit the packet to the Board office.

NAME OF APPLICANT: \_\_\_\_\_

APPLICANT'S STATE PHOTO ID & NUMBER: \_\_\_\_\_

NAME OF OFFICIAL OBTAINING FINGERPRINTS (PRINT): \_\_\_\_\_

NAME OF AGENCY: \_\_\_\_\_

AGENCY PHONE NUMBER: \_\_\_\_\_

If you have any questions, please visit our website at [www.oregon.gov/blsw](http://www.oregon.gov/blsw), or call the Board office at (503) 378-5735. You may also email any questions to [oregon.blsw@state.or.us](mailto:oregon.blsw@state.or.us) ~Thank you for your assistance with this procedural requirement.



### Request for Transmission of Live Scan Fingerprints

**Information for Live Scan Operator** Please note: The Transmitting Agency will NOT be charged or billed for this Background Check.

Requesting Agency ORI: OR024BCSW Requesting Agency Billing Code: BLSW

Reason Fingerprinted: License/Certification/Permit OCA: \_\_\_\_\_

TOT (Type of Transaction): **NFUF** Retained: **N** To properly transmit the fingerprint card, the Applicant's Information shown below must be entered into the Live Scan prior to sending

#### Requesting Agency Information

Agency Name: STATE BOARD OF LICENSED SOCIAL WORKERS

Contact Person: \_\_\_\_\_

Phone Number: \_\_\_\_\_

#### Applicant Information

Name: (Please Print) \_\_\_\_\_  
Last First Middle

Alias or Maiden: \_\_\_\_\_  
Last First Middle

Additional Alias: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_\_ Sex:  Male  Female Height: \_\_\_\_\_ Weight: \_\_\_\_\_  
mm/dd/yyyy feet inches pounds

Race:  Asian or Pacific Islander  Black/African-American  American Indian or Alaska Native  White/Hispanic

Eye Color:  BLK  BLU  BRO  GRY  GRN  HAZ  XXX (Unknown)

Hair Color:  BLK  BLN  BRO  GRY  RED/AUBURN  SDY  WHT  XXX (Bald or Unknown)

Place of Birth: \_\_\_\_\_ (If born in USA, enter the State, if outside USA, enter the Country)

Social Security Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ (The identification process will benefit from this information. However, it is not required that the SSN be provided)

**THIS FORM IS TO BE RETAINED BY THE APPLICANT FOR FUTURE REFERENCE**

ospid 11/2010

Live Scan Transaction Completed By: \_\_\_\_\_ Transmission Date & Time \_\_\_\_\_  
Name of Operator

Transmitting Agency: \_\_\_\_\_ Phone \_\_\_\_\_  
Name of transmitting Agency

**Public Fingerprinting - Live Scan Agencies**  
**ALWAYS CALL THE AGENCY TO VERIFY HOURS AND COST**  
**ALL INFORMATION IS SUBJECT TO CHANGE WITHOUT NOTICE**

**Clatsop County Sheriffs Office**

503-325-8641  
636 Duane Street  
Astoria, OR 97105

**Columbia County Jail**

503-366-4611  
901 Port Avenue  
St. Helens, OR 97051

**Crook County Sheriffs Office**

541-447-6398  
308 NE 2<sup>nd</sup> Street  
Prineville, OR 97754

**Douglas County Jail**

541-440-4440  
1036 SE Douglas Avenue  
Roseburg, OR 97470

**Jefferson County Jail**

541-475-2869  
675 NW Cherry Lane  
Madras, OR 97741

**Florence Police Department**

541-997-3515  
900 Greenwood Street  
Florence, OR 97439

**Cottage Grove Police Department**

541-942-9145  
400 E. Main Street  
Cottage Grove, OR 97424

**Lincoln County Civil**

541-265-4923  
225 West Olive Street  
Newport, OR 97365

**Morrow County Court**

541-676-5317  
Irrigon Justice Court Building 205 SE Third Street  
Irrigon, OR 97844

**Portland PD**

503-823-0721  
1111 SW 2nd, Room 1250  
Portland, OR 97204

**Seaside PD**

503-738-6311  
1090 S. Holladay Drive  
Seaside, OR 97138

**Independence Police Department**

503-838-1214  
240 Monmouth Street  
Independence, OR 97351

**Hermiston Police Department**

541-567-5519  
330 South 1st Street  
Hermiston, OR 97838

**Union County Jail**

541-963-1017  
1109 K Avenue  
La Grande, OR 97850

**Wasco County Civil**

541-506-2580  
511 Washington Street, Suite 102  
The Dalles, OR 97058

**Yamhill County Jail**

503-472-9371  
535 East 5th Street  
McMinnville, OR 97128