

Borough of Old Tappan



227 OLD TAPPAN ROAD
OLD TAPPAN, NJ 07675
(201) 664-1849

BERGEN COUNTY, NEW JERSEY

Volunteers:

In order to comply with the coaching guidelines set forth by the Recreation Commission all volunteer coaches must have a background check. Additionally, all coaches must have completed the Rutgers S.A.F.E.T.Y. Coaching Class. Details on the Rutgers Course can be found on our Website (www.oldtappan.net, under Recreation/Sports Programs/Coaches Requirements). The method to have a background check performed is outlined below.

Applicants are required to use the State contract vendor Sagem Morpho Inc. which provides electronic fingerprint live scan services for all background checks.

Appointments are required for fingerprinting at one of the Sagem Morpho's 18 locations in the state (see attached form for scheduling procedures). When scheduling an appointment you will be provided with a list of locations in New Jersey. A \$26.25 fee must be paid at the time of scheduling by credit card or debit card.

The attached form No. NJAPS2, **must be completed and presented**, at your appointment to be fingerprinted. There will be no exceptions, and applications without forms or with incomplete forms will not be printed. Additionally, you will be required to provide proper identification as dictated by the form NJAPS2

Please read the Form NJAPS2 carefully and entirely to ensure that all processes are completed properly.

Please be aware that these coaching guidelines will be enforced beginning in the Fall of 2008, so please complete this process as soon as possible.

Please feel free to call if you have any questions or concerns.

Thank you,

Gloria Wiesner
Recreation Director

Formerly Sagem Morpho Inc			
(1) Originating Agency Number (ORI #) NJ920610Z		(2) Category YSB	(3) Statute Number 15A:3A-1
(4) Reason for Fingerprinting YOUTH SERVING ORGANIZATION VOLUNTEER		(5) Document Type VB1	(6) Payment Information \$26.25
(7) Contributor's Case # (Unique Identifier) B06005		(8) Miscellaneous	
(9) First Name	(10) MI	(11) Last Name	
(12) Daytime Phone Number () -	(13) Social Security Number	(14) Date of Birth	(15) Height
(16) Weight	(17) Maiden Name (if married female)	(18) Place of Birth (U.S. State --for US Citizen; Country for all others)	(19) Country of Citizenship
(20) Home Address			
Address	City	State	Zip
(21) Gender (Select one) Male () Female () Both ()	(22) Hair Color (Indicate most predominant color, one only)	(23) Eye Color	(24) Race (Select One) A Asian/ Pacific Islander (includes Asian Indian) B Black U Unknown W White (Includes Hispanic/ Spanish Origin) I American Indian / Alaska Native
(25) Occupation	(26) Employer (Name)		
	Employer Address		
	City	State	Zip

APPLICANT INFORMATION – READ THIS FORM CAREFULLY AND FOLLOW ALL INSTRUCTIONS TO COMPLETE THE FINGERPRINT PROCESS. You **MUST** present this completed form at your appointment to be **FINGERPRINTED**. NO EXCEPTIONS ALLOWED. Applicants without forms or with incomplete forms will not be printed.

IDENTIFICATION IS REQUIRED- ACCEPTABLE ID REQUIREMENTS –ID **MUST** include Photo, Name, Address (Home/ Employer) and Date of Birth. Acceptable ID **MUST** be issued by a Federal, State, County or Municipal entity for Identification purposes. Examples of acceptable ID are: 1) Valid Photo Drivers License or Valid Photo ID issued by any State DMV or NJ MVC, 2) Passport. Acceptable ID **MUST** meet all of the underlined requirements above and **MUST** be present on one (1) ID. Combinations of documents are **NOT** acceptable. **If acceptable ID is not presented you will not be fingerprinted.**

For applicants who are required to pay for their own fingerprinting fees, payment is required at the time of scheduling. Payment may be made with a credit card or electronic debit from a checking account. Remember your account will automatically be debited. An \$11 fee is charged to cover the cost of a scheduled appointment for applicants who do not cancel/reschedule by noon on the business day prior to your scheduled appointment (Saturday noon for Monday appointments). All appointments can be canceled/rescheduled via the web without penalty if cancellation requirements are met. The \$11 fee will also apply for applicants who are turned away from the printing sites due to the inability to present proper ID, who fail to present this completed Universal Fingerprint Form provided to you by your requesting agency or employer, or who are turned away because information on this form does not match the information provided during the scheduling process. You will be refunded State and Federal search fees only.

Appointment scheduling is available via the web at www.bioapplicant.com/nj, 24 hours per day, 7 days per week. For applicants who do not have web access, appointments can be made by contacting us toll free at (877) 503-5981 on a first call, first served basis Monday through Friday, 8:00 AM to 5:00 PM EST and Saturday, 8:00 AM to 12 noon EST. English and Spanish speaking operators are available. Hearing impaired scheduling is available at (800) 673-0353. **ONLY** applicants who schedule through the call center can make payment by money order at the fingerprint site. No other form of payment is accepted at the fingerprint site.

Your APPLICANT ID, Site, Date, Time of your appointment, and payment authorization will be confirmed by the call center agent or web confirmation when scheduling is complete. You must record this information in the appropriate blocks below while speaking with the operator. If you appear for fingerprinting at a site where you are not scheduled or on a different date and time, you will be turned away and not fingerprinted. If applicable, you may incur the \$11 appointment fee.

Your PCN number will be recorded when your fingerprinting has been completed. You **MUST** retain a copy of the form and a copy of the receipt provided to you by the Fingerprint Technician for your records. **NO RECEIPTS WILL BE PROVIDED AFTER THE DATE OF PRINTING.**

Applicant ID No.	Scheduled Site/ Date/ Time	PYMT Authorization	PCN
Agency Information #1		Agency Information #2	

APPLICANTS MUST NOT ALTER, SHARE, OR REUSE THIS FORM