

**REVISED ELECTRONIC FINGERPRINT NOTICE
FOR IDAHO INSURANCE LICENSE APPLICANTS
Effective November 1, 2009**

Idaho Department of Insurance requires that an applicant for a new insurance producer or adjuster license must observe all agency processes to obtain a license. Listed below are the finger print instructions you will need to follow.

1. Make an appointment to be fingerprinted with Pearson VUE by visiting www.pearsonvue.com or calling (888) 204-6218. You will choose a location to be fingerprinted and pay the \$60 fingerprinting fee to Pearson VUE. **The following test centers have LiveScan equipment for digital fingerprinting: Boise ID, Pocatello ID, and Coeur d'Alene ID, Spokane WA, Midvale UT, Las Vegas NV and Reno NV.** The Department of Insurance encourages you to test at one of these centers, if possible. NOTE: Be sure to schedule an appointment with Pearson VUE for both services.)
2. You are strongly encouraged to have your fingerprints taken at one of the sites noted above. If you are able to travel to one of these sites, you may contact the Department of Insurance to request a traditional fingerprint card packet. You will pay any additional fees directly to the agency taking your fingerprints. Completed fingerprint cards must be submitted within 60 days of the date the prints are taken. You will mail your completed fingerprint card and the \$60 fee directly to: Idaho Department of Insurance, PO Box 83720, Boise ID 83720-0043. All fingerprints mailed to the Department will be transmitted to the Idaho State Police (ISP) for processing. ISP will perform a state screening and then forward your fingerprints to the Federal Bureau of Investigation (FBI) for a national screening.
3. The results of your background check will typically be returned to the Department within 5 to 7 days of fingerprints being taken at the test centers listed in item #1. If you are fingerprinted elsewhere, results will be returned generally within 2 to 3 weeks after you mail your completed fingerprint card to the Department of Insurance.
4. If your fingerprints are rejected as unreadable, the Department will notify you with instructions on how to provide a new set of fingerprints at no additional charge. If your fingerprints are returned twice as unreadable, ISP will forward your fingerprints to the FBI for a national name screening. This process may take 3 to 6 additional weeks.
5. If you have ever had a felony conviction and you have received a notice from the Department requesting more information, you must make a written request for and obtain an exemption from the Department before you can be licensed. Please contact the Department directly for assistance in requesting a felony exemption.
6. **Your hands should be clean when you have your fingerprints taken. Oil or grease on the fingertip will prevent a clean, readable print from being taken.**

If you have your fingerprints taken at one of the above-referenced test centers, the test center staff will collect the required demographic information from you for your fingerprint record. You will be required to present valid proof of ID (drivers license, state ID, passport, etc). If you have your fingerprints taken anywhere else, be sure to fill out the fingerprint card completely. Please see the line by line instructions for completing your card on the reverse of this page. Failure to provide all required information will result in the card being returned to you, which will delay your licensure.

- (1) **NAME:** Print or type your name, last name first, in the space at the top center of the form.
- (2) **SIGNATURE OF PERSON FINGERPRINTED:** Sign your legal name.
- (3) **RESIDENCE OF PERSON FINGERPRINTED:** Print or type your mailing address, including the city, state, and zip code.

Instructions for Completing Fingerprint Cards

(Information must be typed or printed in black ink – See below for references to numbered fields)

- (4) **DATE:** *** *Leave blank.* *** (The person taking your prints will date the card.) **Please note:** You have 60 days from this date to submit your card to L-1. After 60 days, you will have to redo your fingerprints.
- (5) **SIGNATURE OF OFFICIAL TAKING FINGERPRINTS:** *** *Leave blank.* *** (The person taking your prints will sign the card.)
- (6) **EMPLOYER AND ADDRESS:** Print or type the name and address of your current employer, OR use “self-employed”.
- (7) **ALIASES (AKA):** Print or type all last names you have used which are different from your current last name (i.e., maiden name).
- (8) **CITIZENSHIP (CTZ):** Print or type the name of the country of which you are a citizen.
- (9) **YOUR NO. (OCA):** Print or type the first three letters of your last name and the last four numbers of your social security number.
- (10) **FBI NO. (FBI):** If you have an FBI number, print or type it here. Otherwise, *leave blank.*
- (10) **ARMED FORCES NO. (MNU):** *** ENTER YOUR CONTACT TELEPHONE NUMBER.***
- (12) **SOCIAL SECURITY NO. (SOC):** Print or type your social security number.
- (13) **MISCELLANEOUS NO. (MNU):** *** *Leave blank.* ***
- (14) **SEX:** Print or type “M” for male or “F” for female.
- (15) **RACE:** Print or type “A” (Asian), “B” (Black), “W” (White), “I” (Indian), or “U” (Unknown).
- (16) **HGT:** Print or type your height.
- (17) **WGT:** Print or type your weight.
- (18) **EYES:** Print or type your eye color.
- (19) **HAIR:** Print or type your hair color.
- (20) **DATE OF BIRTH (DOB):** Print or type your month, day and year of birth.
- (21) **PLACE OF BIRTH (POB):** Print or type the city and state OR country where you were born.

INCOMPLETE CARDS WILL BE RETURNED AND WILL NOT BE PROCESSED.

Instructions for Completing Fingerprint Cards

(Information must be typed or printed in black ink – See below for references to numbered fields)

APPLICANT	LEAVE BLANK	TYPE OR PRINT ALL INFORMATION IN BLACK				FBI	LEAVE BLANK												
		LAST NAME <u>NAM</u>	FIRST NAME	MIDDLE NAME															
SIGNATURE OF PERSON FINGERPRINTED		ALIASES <u>AKA</u>	O R I	ID001025Y ST DEPT - INS Boise, ID			DATE OF BIRTH <u>DOB</u>												
RESIDENCE OF PERSON FINGERPRINTED		CITIZENSHIP <u>CTZ</u>					Month	Day											
DATE	SIGNATURE OF OFFICIAL TAKING FINGERPRINTS	YOUR NO. <u>OCA</u>	SEX	RACE	HGT	WGHT	EYES	HAIR	PLACE OF BIRTH <u>POB</u>										
EMPLOYER AND ADDRESS		FBI NO. <u>FBI</u>	LEAVE BLANK																
REASON FINGERPRINTED IDAHO INSURANCE LICENSE IDC SEC 41-1011		ARMED FORCES NO. <u>MNU</u>	CLASS _____																
		SOCIAL SECURITY NO. <u>SOC</u>	REF. _____																
		MISCELLANEOUS NO. <u>MNU</u>																	
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; border: 1px solid black; height: 100px; vertical-align: bottom;">1. R. THUMB</td> <td style="width: 20%; border: 1px solid black; height: 100px; vertical-align: bottom;">2. R. INDEX</td> <td style="width: 20%; border: 1px solid black; height: 100px; vertical-align: bottom;">3. R. MIDDLE</td> <td style="width: 20%; border: 1px solid black; height: 100px; vertical-align: bottom;">4. R. RING</td> <td style="width: 20%; border: 1px solid black; height: 100px; vertical-align: bottom;">5. R. LITTLE</td> </tr> <tr> <td style="width: 20%; border: 1px solid black; height: 100px; vertical-align: bottom;">6. L. THUMB</td> <td style="width: 20%; border: 1px solid black; height: 100px; vertical-align: bottom;">7. L. INDEX</td> <td style="width: 20%; border: 1px solid black; height: 100px; vertical-align: bottom;">8. L. MIDDLE</td> <td style="width: 20%; border: 1px solid black; height: 100px; vertical-align: bottom;">9. L. RING</td> <td style="width: 20%; border: 1px solid black; height: 100px; vertical-align: bottom;">10. L. LITTLE</td> </tr> </table>										1. R. THUMB	2. R. INDEX	3. R. MIDDLE	4. R. RING	5. R. LITTLE	6. L. THUMB	7. L. INDEX	8. L. MIDDLE	9. L. RING	10. L. LITTLE
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LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY			L. THUMB	R. THUMB	RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY														