

Fingerprint Hours

Winter Hours

Monday-Friday
7:30-4:00 pm

Summer Hours

Monday-Thursday
6:30-4:00 pm

We are available for questions and assistance
until 4:30pm



767-4347

or

767-5531

520 School Ave
Panama City, FL 32401

Fingerprint Form for: New Hires, Charter Schools, College Observers, Substitutes

\$75.00

CHECK (payable to Bay District Schools)

MONEY ORDER (payable to Bay District Schools)

NO CASH ACCEPTED

VISA

MASTERCARD

PLEASE PRINT

LEGAL NAME _____

LAST

FIRST

MIDDLE

Social Security Number _____

Phone Number _____

Section 119.071(5)(a)2.4., Florida Statutes requires agencies to notify individuals of the purpose that require the collection of Social Security numbers. Social Security Numbers are used exclusively for processing fingerprints with the Federal Bureau of Investigation and the Florida Department of Law Enforcement. The Social Security Numbers are confidential and exempt from public disclosure. Criminal history, Level 1 and Level 2 background checks/identifiers for processing fingerprints by Department of Law Enforcement/, if SSN is available [Required by Fla. Admin. Code 11C-6.003 and Fla. Stat. § 119.071 (5) (a) 6]

Home Address:
(No P.O. Boxes)

_____ Street

City

State

Zip Code

Do you currently hold or expect to apply for a Florida Educator certificate? Yes No

Date of Birth ____/____/____

Gender: Male Female

Race: Asian Black American Indian White Unknown

Height: _____ Weight: _____ Eyes: Black Blue Brown Green Gray Hazel

Hair: Black Brown Blonde White Gray Bald Sandy Red

State of Birth _____

Position:

Instructional Administrative Support

Substitute Charter School

Supplemental Athletic Coach

Observer/Intern _____

College/University Name

Location: _____

School or Department Name

Revised 10/2016

BDS use only:

Fingerprint Date: _____