



This document is your FAST Fingerprint Pass for a national criminal history record check. You must schedule a fingerprint appointment by visiting www.f1enrollment.com or by calling 1-888-467-2080. You may pay for FAST services online with a credit card or onsite with a check or money order only. Your fingerprints will be submitted to the TXDPS/FBI with results delivered to this agency within one week. A photograph will be taken at the time of your appointment.

- 1. Logon to www.f1enrollment.com and select Texas
2. Select Language option: English or Espanol
3. Enter: First and Last Name
4. Select: All Others
5. Select: Option A, Electronic Submission
6. Select: Yes, I have a FAST Fingerprint Pass
7. Enter: TX921210Z when prompted for ORI#
8. Enter your applicant ID #. SO-First letter of your first name, first letter of your last name, last 4 digits of your social security number.
9. Follow the prompts to enter your personal information and select service location, date and time.
10. Bring this completed form and a valid state issued identification card or driver license with you to your appointment.

Section One: Agency Information

Agency ORI: TX921210Z Agency Name/Department: DSHS - Council on Sex Offender Treatment

Original TCN: Facility Name: \_SO-
(If resubmission for rejected fingerprints) (If applicable)

Section Two: Applicant Information (To be completed by Applicant)

Applicant Last Name First Name Middle Name
Sex Male Female Race Ethnicity Skin Tone
Date of Birth Height Weight Hair Color Eye Color
Place of Birth
Home Address Street Address City State Zip

I certify the applicant information provided above is true and accurate. I authorize the Texas Department of Public Safety to access Texas and Federal criminal history record information that pertains to me and disseminate that information to the above designated Authorized Agency or Qualified Entity through the DPS Fingerprint-based Applicant Clearinghouse of Texas and as authorized by Texas Government Code Chapter 411 and any other applicable state or federal statute or policy.

Signature Date

Section 3: Service Center Information (To be completed by FAST Live Scan Operator)

Date Prints Taken Amount Charged For Service:
Paid by: Check Money Order Visa MasterCard Billing Acct
TCN

I HAVE COMPARED THE GOVERNMENT-ISSUED IDENTIFICATION PRESENTED BY THE APPLICANT AND ATTEST THAT TO MY BEST DETERMINATION, I HAVE FINGERPRINTED THE SAME PERSON.

Printed Name of LSO:

Signature of LSO: \_\_\_\_\_