Instructions to Schedule Fingerprinting Appointment

A) Go to https://ok.ibtfingerprint.com and register for In-state Digital Fingerprinting	B) Enter service code: 2B7N18	
Fingerprinting & Enrollmen For Licensing, Certification or Employment requirem Important Notice regarding ePay Options Please be advised that effective December 15, 2019, we will no longer be accepting credit, card payments online when scheduling appointm session. Applicants, Employers, or Facilities wishing to provide a credit card in advance and not onsite should contact our Billing Department and cor	service code * 2B7N18	
about NCAC accounts Important! You must finish the registration process to be fingerprinted. You will receive an email of the registration process to be fingerprinted. You will receive an email of the registration process to be fingerprinted. You will receive an email of the registration process to be fingerprinted. You will receive an email of the registration process to be fingerprinted. You will receive an email of the registration process to be fingerprinted. You will receive an email of the registration process to be fingerprinted process. The registration process to be fingerprinted process to be fingerprinted process. The registration process to be finded within the registration process. The registration process to be finded within the registration process to be finded within the registration process. The registration process to be finded within the registration process to be finded within the registration process. The registration process to be finded within the registration process to be finded within the registration process. The registration process to be finded within the registration process to be finded within thelew. The registration process to be finded within t	Don't know your Service Code	
Register for In- State Digital Fingerprinting Services Register for Out-of- State Digital Fingerprinting Services Register for Out-of- State Digital Fingerprinting Services Register for Out-of- State Digital Fingerprint Card Processing Service	Reset 😂	
C) Click CONTINUE for Department of Human Services-Child Care-Access and Review-School District Employee	D) Answer required questions	
You have entered Service Code 2B7N18 Department of Human Services - Child Care - Access and Review - School District Employee. Please click <u>Continue</u> to proceed or <u>Cancel</u> to enter a different Service Code. Cancel	In the LAST five years, have you lived outside of Oklahoma? * O yes O no Are you required to register under the Sex Offenders Registration Act or Mary Rippy Violent Crime Offenders Registration Act? * O yes O no	
E) Enter your initials, click signature checkbox, and click GO	F) Enter Zip code 74012	
I certify the information provided on this form is true and complete. Initial here: * Electronic Signature checkbox. *	Enter a zip code to determine the closest fingerprinting location.	
G) Choose a location and select appointment time	H) Fill out your personal information (employer information: Broken Arrow Public Schools, 918- 259-5704, 701 S Main St, Broken Arrow, OK 74012)	
Intersteeling Intersteeling <th co<="" th=""><td>APPLICANT NAME Portx Trust same * mode name isst name * suffix APPLICANT ALLAS OR MAIDEN NAME portx Trust same mode name isst name suffix + Add Allas (rp to 5) HOME ADDRESS Numer * minection stated name * und delignator contry * city * stated name * _ und delignator contry * city * stated name * _ und delignator Contry * city * stated name * _ und delignator Methodos of Contact</td></th>	<td>APPLICANT NAME Portx Trust same * mode name isst name * suffix APPLICANT ALLAS OR MAIDEN NAME portx Trust same mode name isst name suffix + Add Allas (rp to 5) HOME ADDRESS Numer * minection stated name * und delignator contry * city * stated name * _ und delignator contry * city * stated name * _ und delignator Contry * city * stated name * _ und delignator Methodos of Contact</td>	APPLICANT NAME Portx Trust same * mode name isst name * suffix APPLICANT ALLAS OR MAIDEN NAME portx Trust same mode name isst name suffix + Add Allas (rp to 5) HOME ADDRESS Numer * minection stated name * und delignator contry * city * stated name * _ und delignator contry * city * stated name * _ und delignator Contry * city * stated name * _ und delignator Methodos of Contact
I) Review your information and click GO	J) Choose Coupon Code as payment method.	
IVURT REVISI IN MUTULEN IN TO ITE IVURT ELLE Plass review all of the following information. In of this information in incorrect, plasse make changes by clicking the change button max to each section table.	IdentoGO	
IF ALL INFORMATION APPEARS CORRECT> APPLICATION DITALS APPLICATION DITALS APPLICATION DITALS APPLICATION DITALS APPLICATION DITALS APPLICATION DITALS APPLICATION APPLIC	Oklahoma Your total is \$57.25. Please choose a payment method below. Pay Onsite (At appointment) O Credit Card O Certified Check or Money Order O Certified Check or Money Order O Certified Check or Money Order	

Points to Remember

- Bring your unique alphanumeric coupon code to your fingerprinting appointment. The fingerprint technician will ask for this code and apply it as payment.
- Submit fingerprint receipt provided to you to Jessica Wing, B & A Lead Program Coordinator, or you may email a picture of the receipt to <u>jlwing@baschools.org</u> prior to your new hire meeting.
- Broken Arrow Public Schools will only cover the cost of fingerprinting processing as long as you follow the instructions outlined.
- Should you select another form of payment other than Coupon Code, the District will not be able to cover the cost, nor will you be reimbursed any out of pocket expenses.
- > If you have any questions, do not hesitate to call HR at 918-259-5740.

