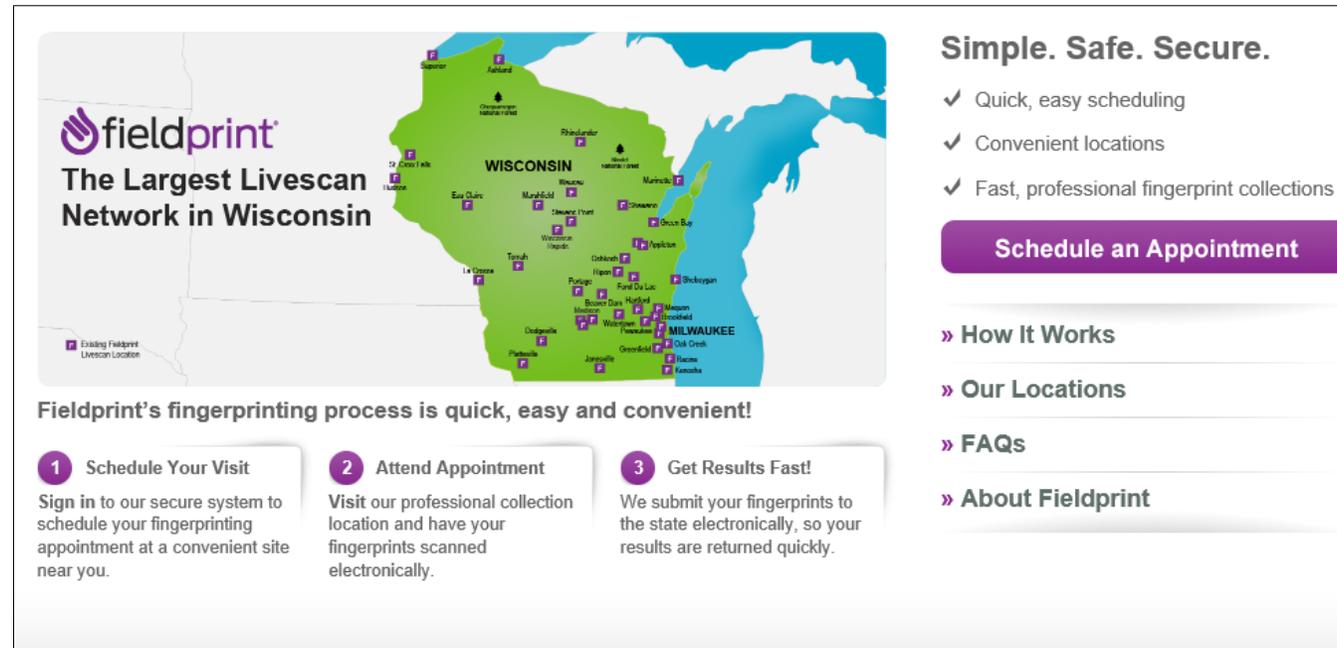


Scheduling a Fieldprint Fingerprint Scan Appointment

A screenshot of the Fieldprint Wisconsin website. The top left features the Fieldprint logo and the text "The Largest Livescan Network in Wisconsin". To the right is a map of Wisconsin with numerous purple location markers. Below the map, the text reads "Fieldprint's fingerprinting process is quick, easy and convenient!". This is followed by a three-step process: 1. Schedule Your Visit (Sign in to our secure system to schedule your fingerprinting appointment at a convenient site near you.), 2. Attend Appointment (Visit our professional collection location and have your fingerprints scanned electronically.), and 3. Get Results Fast! (We submit your fingerprints to the state electronically, so your results are returned quickly.). On the right side of the page, there is a purple button that says "Schedule an Appointment". Below this button are several navigation links: "» How It Works", "» Our Locations", "» FAQs", and "» About Fieldprint".

Simple. Safe. Secure.

- ✓ Quick, easy scheduling
- ✓ Convenient locations
- ✓ Fast, professional fingerprint collections

[Schedule an Appointment](#)

» [How It Works](#)

» [Our Locations](#)

» [FAQs](#)

» [About Fieldprint](#)

1 Schedule Your Visit
Sign in to our secure system to schedule your fingerprinting appointment at a convenient site near you.

2 Attend Appointment
Visit our professional collection location and have your fingerprints scanned electronically.

3 Get Results Fast!
We submit your fingerprints to the state electronically, so your results are returned quickly.

Before scheduling an appointment online be sure to read and follow the instructions provided by the Department of Children and Families.

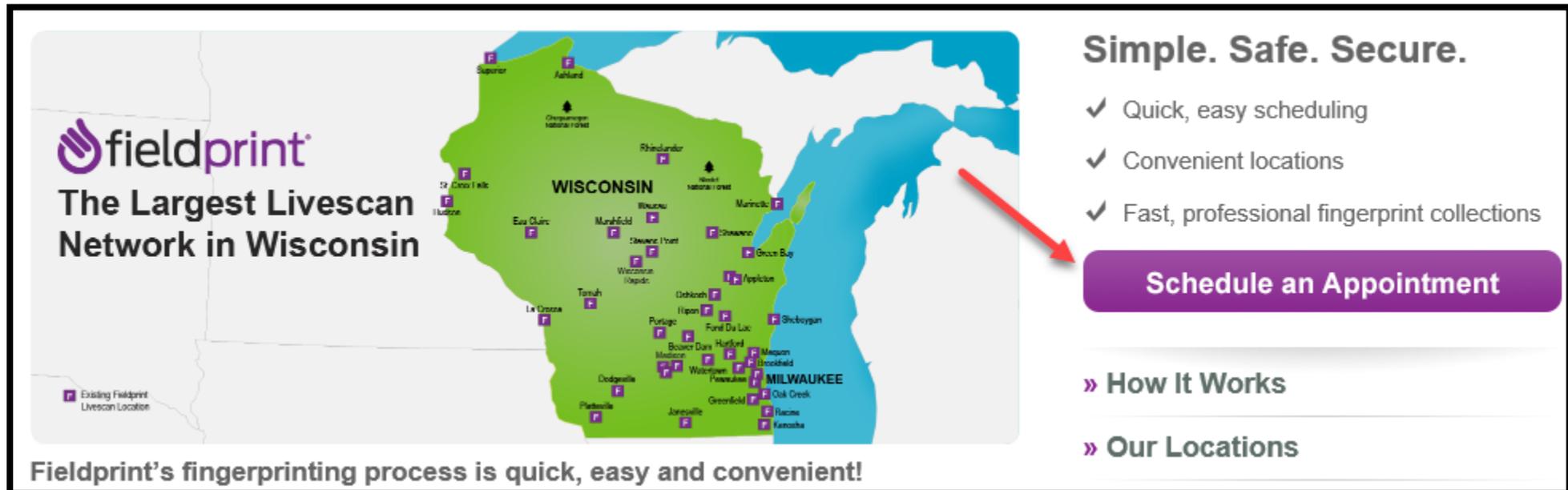
Warning: Do not share Reference IDs/Codes when scheduling an appointment!

Each individual age 18+ will be mailed a fingerprint instruction letter that is to be used *only* for or by the individual named in the letter.

Do not share letters or codes provided in the letter.

After receiving a Fingerprint Instruction letter from the Child Care Background Unit an individual will need to schedule a Fieldprint appointment online.

<https://fieldprintwisconsin.com/>



The screenshot displays the Fieldprint Wisconsin website interface. On the left, the Fieldprint logo is accompanied by the text "The Largest Livescan Network in Wisconsin". Below this, a map of Wisconsin is shown with numerous purple location markers. A legend in the bottom left corner of the map area indicates that a purple square represents an "Existing Fieldprint Livescan Location". To the right of the map, the text "Simple. Safe. Secure." is displayed above a list of three benefits: "Quick, easy scheduling", "Convenient locations", and "Fast, professional fingerprint collections". A prominent purple button labeled "Schedule an Appointment" is positioned below the list. At the bottom of the page, there are two menu items: "» How It Works" and "» Our Locations". A red arrow points from the "Schedule an Appointment" button towards the map area.

fieldprint
The Largest Livescan Network in Wisconsin

Simple. Safe. Secure.

- ✓ Quick, easy scheduling
- ✓ Convenient locations
- ✓ Fast, professional fingerprint collections

Schedule an Appointment

» How It Works

» Our Locations

Fieldprint's fingerprinting process is quick, easy and convenient!

New to Fieldprint?

If the subject of the search has not used Fieldprint before they will need to sign up as a new user and create a password and answer the security questions.

Sign Up

We value your personal information and keeping it secure at ALL times. [Privacy Statement](#)

Your information is saved and continue at any time

Required items are marked with *

To register with Fieldprint®, please enter the password you would like to use below, along with a security question and answer. All of the following fields are required.

Password Rules
Must be 8 to 16 characters long
Must contain at least one capital letter, one lowercase letter, one number and one special character (!@#\$%*?._+|~-={}[]:;))
May not be the same as your current password
May not contain the phrase 'password' or match any on Fieldprint's 'banned' password list
May not be the same as a password you have used in the last 14 days
May not be the same as any of your last 12 passwords used
May not contain your username
Is case sensitive

Password you would like to use *

Re-type Password * ?

Security Question * ?

Answer to your Security Question * ?

Contact Email Address * ?

[Sign Up and Continue](#)

Used Fieldprint in Past?

If the subject of the search has used Fieldprint in the past they may sign in using their email and password.

Required items are marked with *

New Users | Sign Up

If you are a new user, please register with Fieldprint® in order to schedule your appointment. Begin the registration process by entering your e-mail address below.

Email address: *

Existing Users | Sign In

If you already have an account, please log in below to :

- Check your appointment status
- Re-schedule your appointment
- View and print your receipt

Email address: *

Password: *

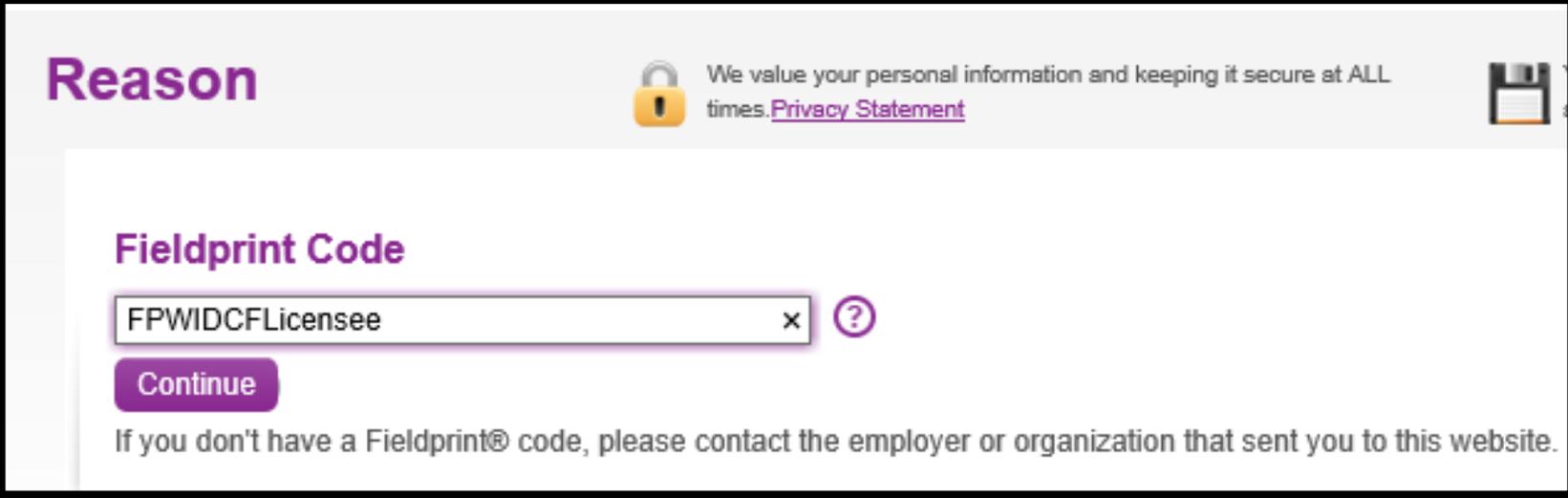
 [Forget Password?](#)



Enter Fieldprint Code

The fingerprint instruction letter mailed by DCF includes a Fieldprint code to be used for all DCF child care background checks:

Enter in the box FPWIDCFLicensee – then click “Continue”



The screenshot shows a web form with a purple header area. On the left, the word "Reason" is written in purple. On the right, there is a security notice: "We value your personal information and keeping it secure at ALL times." followed by a link to "Privacy Statement". A yellow padlock icon is to the left of the text, and a floppy disk icon is to the right. Below the header, the text "Fieldprint Code" is displayed in purple. Underneath is a text input field containing "FPWIDCFLicensee". To the right of the input field are a small "x" icon and a question mark icon. Below the input field is a purple button labeled "Continue". At the bottom of the form, there is a greyed-out instruction: "If you don't have a Fieldprint® code, please contact the employer or organization that sent you to this website."

Add Personal Information & Follow Instructions

Personal Information



We value your personal information and keeping it secure at ALL times. [Privacy Statement](#)



Your information is saved as you complete each step. You can log in and continue at any time.

Required items are marked with *

Please enter your personal information below. ?

NOTE: The information entered on this screen must belong to the person being fingerprinted. The name provided for the appointment must match both forms of identification and the date of birth must be on the primary form of ID, and must match exactly. Your appointment will not be completed if you cannot provide two forms of matching IDs.

Acceptable Forms of ID

First Name: * Middle Name: Last Name: * Suffix:

Please enter any other names or aliases you have used. If you have used more than one alias, please click the "Add another name" button below to enter other aliases. ?

First Name: Middle Name: Last Name: Suffix:

First Name: Middle Name: Last Name: Suffix:

[+ Add another name](#) ?

Social Security Number: * ?

Address Line 1: * ?

Address Line 2 (Suite/Apt/etc.): ?

City: * ?

Enter Alias Names Here

Preferred Contact Method: *
 Phone E-mail ?

Appointment Reminder: *
Would you like a message appointment reminder sent the day of your appointment?
 Text Message E-mail: No ?

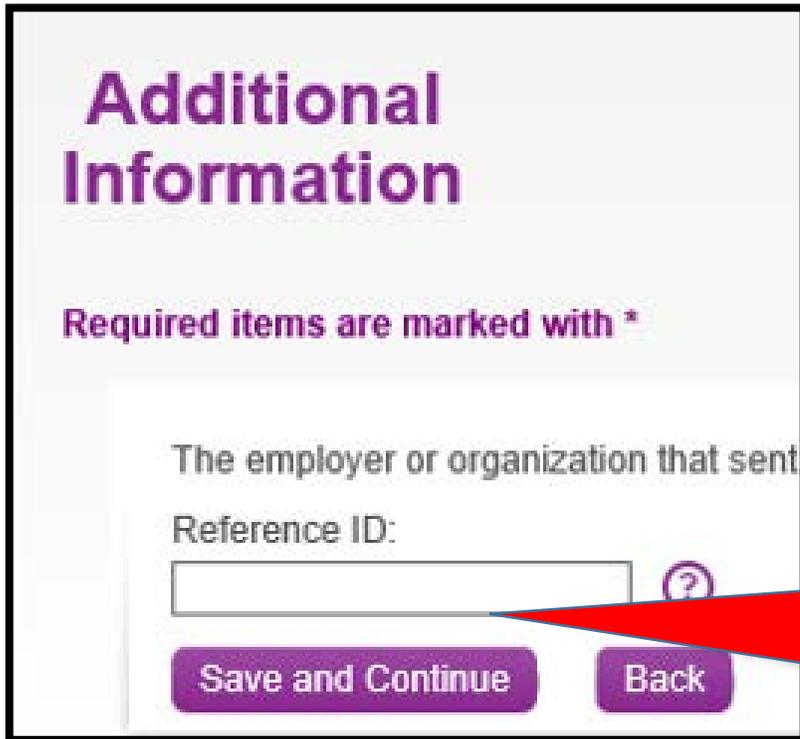
Mobile Phone: *
 ?

Carrier: *

[Save and Continue](#)

Remember to click "save and continue" for each page

Enter the Reference Code provided by DCF in your fingerprint instruction letter.



Additional Information

Required items are marked with *

The employer or organization that sent

Reference ID:

Save and Continue Back

This is a unique code provided to the individual in the instruction letter sent by DCF. Warning! Do not share reference IDs or use another person's reference ID, as this will delay the completion of the background check

Enter the code provided to the specific individual named in the letter. Codes may not be shared or used multiple times.

Read and Sign Release Statements

Read the statement

Click "I agree"

Enter your name
and date

Click "Continue"

Release

We value your personal information and keeping it secure at ALL times [Privacy Statement](#)

Your information is saved as you complete each step. You can  and continue at any time.

Required items are marked with *

Please read and agree to the following

Requesting Individual or Agency

Name: Department of Children and Families, Child Care Licensing **Phone:** (608) 266-8001
Address: Bureau of Early Care Regulation **Attn:** DCF Caregiver Background Unit
201 E. Washington Avenue, Room E200
Madison , WI 53707

Investigation for the purpose of accessing and reviewing Wisconsin and national criminal history records that may pertain to me.

By signing this waiver agreement it is my intent to authorize dissemination of such criminal history record information that may pertain to me to the agency with which I am employed, seeking employment with, seeking to serve as a volunteer for, or seeking licensure from. I also understand that this information may only be used for the purpose it was submitted.

I understand that it is not employment discrimination because of arrest record to refuse to employ or license, or to suspend from employment or licensing, any individual who is subject to a pending criminal charge or has been convicted of any felony, misdemeanor or other offense if the circumstances of the offense or charge substantially relate to the circumstances of the particular job or licensed activity.

I Agree: *

Your Full Name: *
 ?

Address: *
 ?

Today's date:

Month: * / **Day:** * / **Year:** * ?

Read and Sign Privacy Statement

Privacy Statement

We value your personal information and keeping it secure at ALL times. [Privacy Statement](#)

Your information is saved as you complete each step. You can save and continue at any time.

Required items are marked with *

Please read and agree to the following

Pub.L. 92-544, Presidential executive orders, regulations and/or orders of the Attorney General of the United States, or other authorized authorities. Examples include, but are not limited to: 5 U.S.C. 9101; Pub.L. 94-29; Pub.L. 101-604; and Executive Orders 10450 and 12968. Providing the requested information is voluntary; however, failure to furnish the information may affect timely completion or approval of your application.

Social Security Account Number (SSAN): Your SSAN is needed to keep records accurate because other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 USC 552a), the requesting agency is responsible for informing you whether disclosure is mandatory or voluntary, by what statutory or other authority your SSAN is solicited, and what uses will be made of it. Executive Order 9397 also asks Federal agencies to use this number to help identify individuals in agency records.

Principal Purpose: Certain determinations, such as employment, security, licensing, and adoption, may be predicated on fingerprint based checks. Your fingerprints and other information contained on (and along with) this form may be submitted to the requesting agency, the agency conducting the application investigation, and/or FBI for the purpose of comparing the submitted information to available records in order to identify other information that may be pertinent to the application. During the processing of this application, and for as long hereafter as may be relevant to the activity for which this application is being submitted, the FBI may disclose any potentially pertinent information to the requesting agency and/or to the agency conducting the investigation. The FBI may also retain the submitted information in the FBI's permanent collection of fingerprints and related information, where it will be subject to comparisons against other submissions received by the FBI. Depending on the nature of your application, the requesting agency and/or the agency conducting the application investigation may also retain the fingerprints and other submitted information for other authorized purposes of such agency(ies).

Routine Uses: The fingerprints and information reported on this form may be disclosed pursuant to your consent, and may also be disclosed by the FBI without your consent as permitted by the Federal Privacy Act of 1974 (5 USC 552a(b)) and all applicable routine uses as may be published at

I Agree: *

Your Full Name: * ?

Today's date:

Month * / Day * / Year * ?

Read the Challenge Notice

RECORD COMPLETENESS OR ACCURACY CHALLENGE NOTICE

FBI Record: This record is subject to the following use and dissemination restrictions:

Under provisions set forth in Title 28, Code of Federal Regulations (CFR), Section 50.12, both governmental and nongovernmental entities authorized to submit fingerprints and receive FBI identification records must notify the individuals fingerprinted that the fingerprints will be used to check the criminal history records of the FBI. Identification Records obtained from the BRI may be used solely for the purpose requested and may not be disseminated outside the receiving department, related agency or other authorized entity.

The official making the determination of suitability for licensing or employment shall provide the applicant the opportunity to complete, or challenge the accuracy of, the information contained in the FBI identification record. The deciding official should not deny the license of employment based on the information in the record until the applicant has been afforded a reasonable time to correct or complete the information, or has declined to do so.

An individual should be presumed not guilty of any charge/arrest for which there is no final disposition stated on the record or otherwise determined. If the applicant wishes to correct the record as it appears in the FBI's CJIS Division Records System, the applicant should be advised that the procedures to change, correct or update the record are set forth in Title 28, CFR, Section 16.34.

The CJIS Division is not the source of the data appearing on identification records. All data is obtained from fingerprint submissions or related identification forms submitted to the FBI by local, state, and federal agencies. As a result, the responsibility/or authentication and correction of such data rests upon the contributing agency (i.e., police department, county court, etc.). Please contact this agency or the central repository in the state where the arrest occurred to request a change, correction, or update. The FBI is not authorized to modify the record without written notification from the appropriate criminal justice agency.

Wisconsin Record:

Subject to 111.33 to 111.36, Section 111.321 of the Wisconsin Statutes prohibits act of employment discrimination based on arrest and conviction records. Applicants should be notified of their right to challenge the accuracy and completeness of any information contained in a criminal record before any final determination is made. Challenges should be submitted to the Crime Information Bureau on form DJ-LE-247 and may include a request for fingerprint comparison.

Form DJ-LE-247 and information on the Wisconsin challenge process may be found online at <https://www.doj.state.wi.us/dles/cib/cib-forms>

Other State's Record: Contact the state holding or contributing the record being challenged. Please contact the Criminal History Unit at 608-266-7314 or cibcriminalhistory@doj.state.wi.us if you have additional questions.

Save and Continue

Back

Find a Location & Schedule Your Appointment

Search for a location that is convenient for you. Enter your work or home address, click “Find” and the system will provide you with a list of Fieldprint locations near that address.

Schedule Your Visit

 We value your personal information and keeping it secure at ALL times. [Privacy Statement](#)

 Your information is saved and continues to be available

Required items are marked with *

Find a Location

[Use your home address](#)

Please enter your home, work, or other convenient address below and click the Find button. *



Select a location with store hours and distance that is convenient for you.

	Location Name	Distance	Hours of Operation	Notes
	1. Fieldprint Site - Drug & Alcohol Testing 24/7 1574 West Broadway Broadway Station, between MedSpa & Home Instead Madison, WI 53713	2.8 mi	M TU W TH F 07:00 AM - 03:50 PM Schedule Appointment	Livescan, Photo, I9 No Additional Fees Expedited Processing
	2. Fieldprint Site - The UPS Store #2831 2935 South Fish Hatchery Road Yarmouth Crossing Madison, WI 53711	4.8 mi	M TU W TH F 11:00 AM - 06:30 PM SA 10:00 AM - 03:30 PM Schedule Appointment	Livescan, Photo, I9 No Additional Fees Expedited Processing
	3. Fieldprint Site - The UPS Store #1695 4230 East Towne Boulevard Essex Square Madison, WI 53704	4.9 mi	M TU W TH F 10:00 AM - 05:00 PM SA 10:00 AM - 03:00 PM Schedule Appointment	Livescan, Photo, I9 No Additional Fees Expedited Processing
	4. Fieldprint Site - The Camera Company 6742 Odana Road In strip mall next to Ginza Restaurant Madison, WI 53719	6.1 mi	M TU W TH F 10:00 AM - 07:30 PM Schedule Appointment	Livescan, Photo, I9 No Additional Fees Expedited Processing
	5. Fieldprint Site - The UPS Store #3572 1660 South Church Street Riverplace Shopping Center, near China Buffet Watertown, WI 53094	26.3 mi	M TU W TH F 10:00 AM - 04:00 PM Schedule Appointment	Livescan, Photo, I9 No Additional Fees Expedited Processing

Click “Schedule Appointment” to schedule an appointment at a specific location in the list.

Read message and confirm by clicking “Continue”

Available Dates and Times

Enter a date (mm/dd/yyyy) or select an available date from the calendar:

/ /

Select an available time on:
OCTOBER 2, 2018

Morning:
Before 12 PM

Afternoon:
12 PM - 5 PM

Evening:
After 5 PM

September 2018							October 2018						
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa
						1	1	2	3	4	5	6	
2	3	4	5	6	7	8	7	8	9	10	11	12	13
9	10	11	12	13	14	15	14	15	16	17	18	19	20

You are about to schedule an appointment for 10/2/2018 at 11:20 AM.

Location Name: Fieldprint Site - The UPS Store #2831

Once an appointment is made, you may not make a change or cancel less than 24 hours before the appointment time without incurring a \$7.75 charge.

Click **Continue** to schedule this appointment.
Click **Cancel** to select another appointment time.

READ THIS!

Enter Payment Information

Payment

We value your personal information and keeping it secure at ALL times. [Privacy Statement](#)

Your information is saved as you complete each step. You can log and continue at any time.

Required items are marked with *

Appointment Location

Fieldprint Site - The UPS Store #2831
2935 South Fish Hatchery Road Yarmouth Crossing
Madison, WI 53711

[Change Time or Location](#)

Appointment date and time:

10/02/2018 at 11:20 AM

Fee Type	Fee Amount
Fieldprint Scheduling Fee	\$37.75
Your total is:	\$37.75

Please note: Once an appointment is made, you may not make a change or cancel less than 24 hours before the appointment time without incurring a \$7.75 charge.

Please use one of these payment options. Your appointment will not be scheduled until payment has been completed.

Credit Card Electronic Check

Note: This payment will appear on your credit card statement as a charge from Fieldprint.

If you use a debit card please be aware that if you enter an invalid address, a temporary hold could be placed on your bank account for the amount charged, for each payment attempt. Most card issuing banks will release the funds within a few days.

Credit Card Information

Cardholder's First Name: * ?

Cardholder's Middle Name: ?

Cardholder's Last Name: * ?

Credit Card Number: * ?

Credit Card Type: *

Expiration Date: *

Month * / Year * ?

Security Code: * ?

Billing Address

Address Line 1: * ?

City: * ?

State: *

Select..... ?

Zip Code: * ?

Review Appointment Confirmation Details

Fieldprint Welcome, ITTestVW! [Logout](#) English Escort

1 Data Collection 2 Authorization 3 Time and Location 4 **Confirmation**

Confirmation

Registration # 1263994 for DayCareEmp ITTest is scheduled for:
April 22, 2014 at 11:40 AM

[Print Receipt](#)
[Get Printable Directions](#)

You must print this appointment confirmation and bring it with you to your appointment.

Your appointment information will also be emailed to you for additional reference. If an email is not received within one hour, please contact Fieldprint@ at 877-614-4364.

Your Appointment Location
Fieldprint Site - Marlton, NJ
400 Lippincott Drive Suite 115
Marlton, NJ 08053-

Please note: Once an appointment is made, you may not make a change or cancel less than 24 hours before the appointment time without incurring a charge.

Please call us at 800-799-1067 to rate your experience. We would appreciate feedback on your appointment and our site.

If you decide to reschedule your appointment in the future, please return to wisconsin.fieldprint.com, sign in as an existing user, and click on the red Reschedule link to make a new appointment.

What identification to bring?
You must print this appointment confirmation and bring it with you to your appointment.

You must bring two forms of identification. At least one form has to be a picture ID from the Picture ID list below and the second has to be from the Secondary ID list.

If you do not bring two valid, acceptable forms of ID, your appointment cannot be completed.

Picture ID:

- State-issued drivers license
- State-issued non-driver identity
- U.S. passport
- Military Identification Card
- Work Visa w/ Photo
- Foreign Passport

Secondary ID:

- State-issued drivers license
- State-issued non-driver identity
- U.S. passport
- Military Identification Card
- Social Security Card
- Bank Statement
- Utility bill
- Credit Card
- Marriage Certificate
- Vehicle Registration
- State Government issued Certificate of Birth
- Foreign Passport
- Federal Government Personal Identity Verification
- Certificate of Citizenship
- Certificate of Naturalization
- INS I-551 Resident/Allen Card
- INS I-688 Temporary Resident Identification Card
- Transportation Worker Identification Credential (TWIC Card)

Rescheduling Your Appointment

If you need to reschedule your appointment, please click on the link below or call 877-614-4364. Please do not contact the collection site directly for all scheduling is handled by Fieldprint. Please note that once an appointment is made, you may not make a change or cancel less than 24 hours before the appointment time without incurring a charge.

[Reschedule Appointment](#)

Print your confirmation receipt and directions to the location.

Read the cancellation policy and how to reschedule your appointment.

Be sure to bring acceptable forms of identification listed in your confirmation.

After the Appointment

- After the completed fingerprint scan appointment Fieldprint will send the prints to the Wisconsin Department of Justice for processing.
- The results of the background check will be sent directly to DCF.
- The DCF Child Care Background Unit will review the results and make a preliminary eligibility determination within 5-7 days and a final eligibility determination within 45 days.