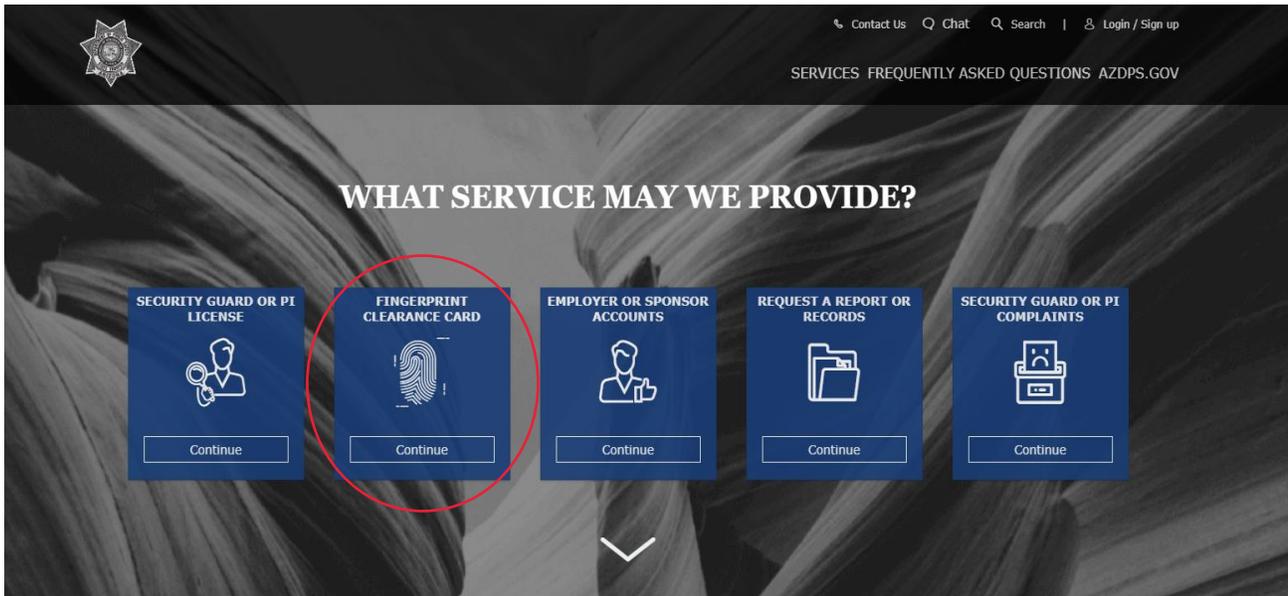


APPLICANT REGISTRATION

To start, please go to <https://psp.azdps.gov/>



Click 'Fingerprint Clearance Card' (for first time applicants and IVP renewals).



Click 'Apply for a Card/ Request a Replacement' and continue.

Login *Indicates required field.

Login to access your AZDPS account.

Email Address*

Password* 👁

[Forgot Password?](#)

Login

Don't have an account? [It's easy to create one.](#)

OR

[Continue as Guest](#) to print a PDF form.

Please **create** an AZDPS account (or **login** if you already have one). You will be taken through 4 steps to create an account. Please fill out your personal information, address, and security questions.

✓ ✓ ✓ ✓

Profile Information Address Security Questions Create Account

Verify Your Email

Your account has been created, but it needs to be verified. Check your email and click the confirmation link to verify your account. If you did not receive the email, check your spam, junk, or trash folder.

[I did not receive the email. Please send it again.](#)

Once you have finished creating your account, you will need to verify your email. Follow the instructions above to verify your account. Once your account has been confirmed, please login with your credentials.

If you are applying for a renewal Fingerprint Clearance Card, click 'Yes' and continue below. If you are applying for a Fingerprint Clearance Card for the *first time*, click 'No' and skip to page 6 of this guide.

Have you applied for a DPS Fingerprint Clearance Card in the past?

 Yes

 No

STATE OF ARIZONA DEPARTMENT OF PUBLIC SAFETY

Services Frequently Asked Questions AZDPS.GOV

Hi, Alissa

Please enter your application number or clearance card number

Application number Clearance card number

Enter number

Enter number

[I do not know or have my clearance card or application number.](#)

STATE OF ARIZONA
DEPARTMENT OF PUBLIC SAFETY
Level One Fingerprint Clearance Card

Name: AZTESTEEEEEE A. AZTESTEEEEEE

Birth Date: 11/1/1991 Issue Date: 11/1/2016

M	190	6 00	BLK	GRY
Sex	Weight	Height	Eyes	Hair

Card Number: 4A01780029 Expire Date: 11/1/2022

IVPE007108

Enter in your existing card information and click 'Continue'. On the next page click "Apply For A New Clearance Card".

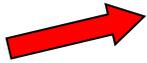
What do you need to do?



Apply For A New Clearance Card



Replace An Existing Clearance Card



If your contact information has changed, please edit your [profile information](#) before completing this application.

Will you be working or volunteering in a public or charter school?



Yes



No

Do you have an IVP Number?



Yes



No

If you have an IVPXXXXXXX number on your card, please click 'Yes' and enter in the IVP number located on the bottom of your Fingerprint Clearance Card. Once information is verified, you should be directed to read the Privacy Act Statement, please read and click 'Continue'.

Privacy Act Statement Reason(s) for Applying Your Information Signature Review

Reason(s) for Applying

Check all the box(es) to indicate why you are applying*

Teacher → State Board of Education (Teacher or Other Certification) ARS § 15-534

Tutor or Teacher Preparation Programs ARS § 15-534

Charter School Instructor ARS § 15-183

School Bus Driver ARS § 28-3228

Classified → Public and/or Charter School Non-Certified Personnel ARS § 15-512

Public and/or Charter School Contractor, Subcontractor or Vendor and their Employees ARS § 15-512.

Are you an employee or volunteer? *

Employee Volunteer

Are there other reasons you are applying? *

Yes No

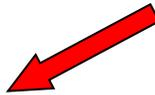
Select the appropriate reasons for applying based on your current employment and click 'Continue'. Please fill out your personal information, employment information, sign and review. (Washington Elementary School District • 4650 W. Sweetwater Glendale, AZ 85304 • 602-347-2600)

Once you have reviewed your application, you will now be taken to 'My Order' screen to submit payment. Your card will be sent to the address on your application. **Once you receive your card, please provide HR a copy of the front and back for your file.**

For First Time Applicants Applying For A Card

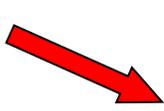
Have you applied for a DPS Fingerprint Clearance Card in the past?



If this is your first time applying for a DPS Fingerprint Clearance Card, click **'No'** then click **'Apply For A New Clearance Card'**.

What do you need to do?



Apply For A New Clearance Card



Replace An Existing Clearance Card

If your contact information has changed, please edit your [profile information](#) before completing this application.

Will you be working or volunteering in a public or charter school?



Yes



No

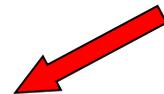
Do you have an IVP Number?



Yes



No



Once you choose 'No', you should be directed to read the Privacy Act Statement. Please read and click 'Continue'.

Privacy Act Statement
 Reason(s) for Applying
 Your Information
 Signature
 Review

Reason(s) for Applying ♥

Check all the box(es) to indicate why you are applying*

- State Board of Education (Teacher or Other Certification) ARS § 15-534
- Tutor or Teacher Preparation Programs ARS § 15-534
- Charter School Instructor ARS § 15-183
- School Bus Driver ARS § 28-3228
- Public and/or Charter School Non-Certified Personnel ARS § 15-512
- Public and/or Charter School Contractor, Subcontractor or Vendor and their Employees ARS § 15-512.

Are you an employee or volunteer? *

Employee
 Volunteer

Are there other reasons you are applying? *

Yes
 No

Teacher →

Classified →

Select the appropriate reasons for applying based on your current employment and click 'Continue'.
 Please fill out your personal information, employment information, sign and review.
 (Washington Elementary School District • 4650 W. Sweetwater Ave. Glendale, AZ 85304 • 602-347-2600)

Signature 

Fingerprinting Preference

Before completing this application please select how you prefer to get fingerprinted. If you select paper, you will receive a hard copy of your fingerprint card from DPS.

If you choose electronic, when you finish your application you will receive a message in your message center, with instructions for fingerprinting.

Fingerprint Method*

Electronic Paper

Applicant Signature

I authorize custodians of records to release information to the AZ DPS to process my application and acknowledge I have read the Notice to Applicant.*

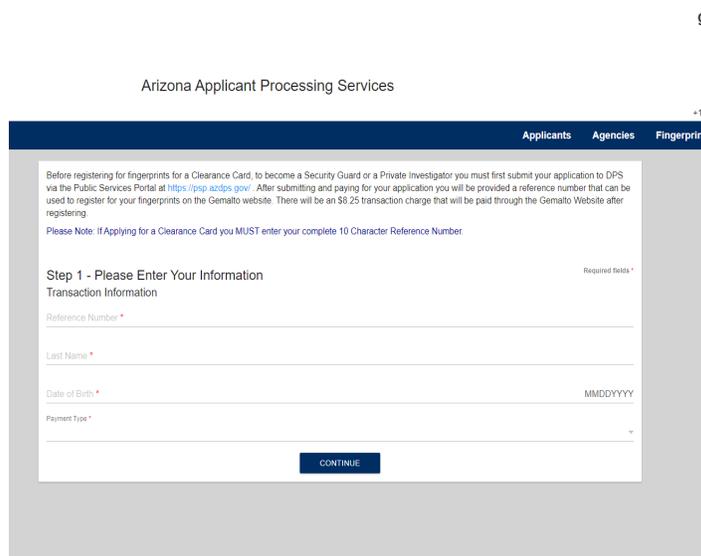
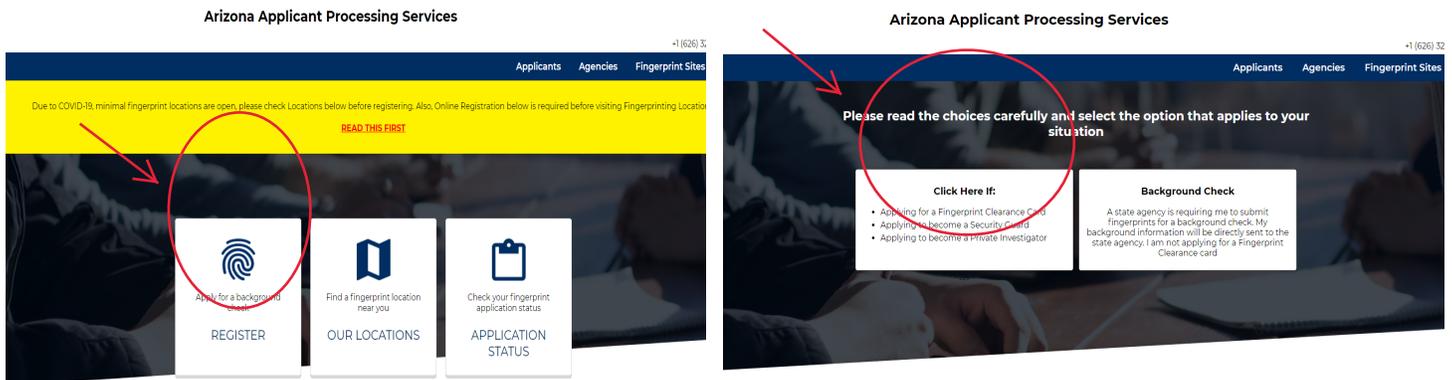
Signature *

Type your full legal name as your signature.

Please select 'Electronic' as your fingerprinting preference and sign.

Once you have reviewed your application, you will now be taken to 'My Order' screen to submit payment. Once payment is received, you will be given a **Reference Number/Application Number (IVPPXXXXXX)** for use when getting fingerprinted. **Please save that Reference Number and continue below!**

You will then be directed to the [Electronic Fingerprinting Application Services](https://www.aps.gemalto.com/az/index.htm) (https://www.aps.gemalto.com/az/index.htm) vendor website to find a location for fingerprinting and register.



Please bring with you your Reference Number/Application Number and any other provided documentation when you go to get fingerprinted.

Once AZDPS receives your electronic prints, the fingerprints will be processed for review. Any communication regarding your application will be sent to the email address on the application. Once you receive your card, **please provide HR a copy of the front and back of card** for your personnel file.