



# FINGERPRINT REGISTRATION / INFORMATION FORM

## Citrus County School Board

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- Procedure:** Complete this Form, then go online to:  
[https://pci.aps.gemalto.com/flper/pub/registration\\_fdoe\\_pci.pl](https://pci.aps.gemalto.com/flper/pub/registration_fdoe_pci.pl)  
Using this form, fill out the application, then print out the receipt at the end of the process.
- Payment:** Cost is \$75.25 payable with a Credit Card online.
- Appointment:** Call the CCSB Purchasing Department at (352) 726-1931 ext. 2479 or email [davism@citruschools.org](mailto:davism@citruschools.org) to setup and appointment.
- Location:** Citrus County School Board  
Purchasing Department:  
1007 W. Main Street, Building 200  
Inverness, FL 34450

**Bring with you the following items:**

- This completed Form
- Printed Registration Receipt
- Valid (non-expired) Driver's License OR State-Issued ID  
Non-US Citizens must provide a Resident Alien Card

**Badge:** A Vendor Badge will be issued after the background check is approved and will be valid for Five (5) Years.

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**STEP 1:** Enter the following information on the Application Registration Screen on the Cogentid website listed above.

**Transaction Information:**

County: Select: **CITRUS**  
CRI Literal: Select: **FL931122Z - CITRUS COUNTY SCHOOLS/CONTRACTORS & VENDORS**  
Payment Type: Credit Card

**Personal Information:**

Last Name: \_\_\_\_\_  
First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_  
Suffix: Select: Jr, Sr, II, III, IV  
Date of Birth: \_\_\_\_\_  
Place of Birth: \_\_\_\_\_ State OR  
\_\_\_\_\_ Country (If not born in U.S.)  
SSN: \_\_\_\_\_

Sex: Select: Male, Female or Unknown  
Race: Select: Asian/Pacific Islander, Black, American Indian/Alaskan Native, Unknown or White/Latino  
Eye Color: Select: Black, Blue, Brown, Green, Gray, Hazel, Maroon, Multicolored, Pink or Unknown  
Hair Color: Select: Bald, Blue, Black, Blonde, Brown, Green, Gray, Orange, Purple, Pink, Red, Sandy, White, Unknown  
Height: \_\_\_\_\_ Feet \_\_\_\_\_ Inches  
Weight: \_\_\_\_\_ Pounds  
Citizenship: \_\_\_\_\_ Country  
Address 1: \_\_\_\_\_  
Employee's Home Address (Include Street Address, City, State, Zip)  
Address 2: \_\_\_\_\_  
Company Name/Address (Include Street Address, City, State, Zip)  
Phone: (\_\_\_\_\_) \_\_\_\_\_ Employee  
(\_\_\_\_\_) \_\_\_\_\_ Company  
Email: \_\_\_\_\_ (optional)

**STEP 2: Verify the information, then click the "Next" button at the bottom of the page.**

**STEP 3: Registration Complete Screen verifies payment type and amount – Click on the "Print Receipt" button.**

**STEP 4: After Receipt is printed, click on "Register Another Applicant" or "Home" Button.**

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Supervisor's Name:** \_\_\_\_\_

**OFFICE USE ONLY:**

**Approved** \_\_\_\_\_ **Denied** \_\_\_\_\_

**By:** \_\_\_\_\_

**Date:** \_\_\_\_\_