Pennsylvania Non-Resident Cardscan

Universal Enrollment Platform Processing Overview

Cardscan processing is available for those applicants residing outside of Pennsylvania or physically unable to visit an IdentoGo location. In order to complete the process, applicants must complete the following steps.

1. Obtain fingerprints on FBI (FD-258) fingerprint card and complete personal information fields on fingerprint card.
2. Pre-enroll for cardscan submission at UEnroll.identogo.com. All processing fees will be collected during the pre-enrollment process. A pre-enrollment confirmation page will be provided once registration is complete.
3. Print and sign the completed pre-enrollment confirmation page, which includes the barcode printed on the top right of the page. Mail the signed pre-enrollment confirmation page and the completed fingerprint card to the mailing address provided by your agency or during this pre-enrollment process. For further instructions, each applicant should contact their employer or agency contacts for those details.

Please review the following pages for more detailed instructions regarding the Universal Enrollment Platform Pre-Enrollment process.
Directions for Pre-enrollment and Payment – Required for ALL Fingerprint Cards

1. Visit http://uenroll.identogo.com and enter your 6-character Service Code assigned to the agency you plan to submit prints for, then click the GO button.

   ![IdentoGO](https://example.com/idento-go.png)

   If you have not yet been provided a Service Code by the requesting agency, follow the link labeled “Don’t know your Service Code? [Click Here](https://example.com/don't-know-service-code) to select from a list of agency names or use the agency ORI or contact your agency for assistance.

   ![Enter your Service Code to get started](https://example.com/enter-service-code.png)

   Please note: Not all agency ORI’s may be available with this look up tool.

   Please check with your agency, contributor, employer, or licensing administrator for specific information about Service Codes.
2. The next screen is where you are going to select that you would like to submit a fingerprint card for processing.

You will need to confirm that you are wanting to proceed with submitting a fingerprint card for processing. Click ‘Continue’ to proceed to the next page.

3. The next few screens will collect essential information such as name, date of birth, address, etc. You will need to complete all required information.

4. Pay for your service using an Authorization Code or Credit Card. If the Service is Auto-Billed to your Agency, payment will not be required.
5. Once you have submitted your payment, you will be directed to the final registration page. You will need to complete sections 2 and 3 and submit this page along with your fingerprint card for processing. An example of the final screen is shown below.

### Final Registration Page Example

<table>
<thead>
<tr>
<th>Date:</th>
<th>MM/DD/YYYY</th>
</tr>
</thead>
<tbody>
<tr>
<td>UE ID:</td>
<td>UE ID Sample</td>
</tr>
<tr>
<td>Applicant</td>
<td>Sample Applicant</td>
</tr>
<tr>
<td>Service Code</td>
<td>Service Code Name</td>
</tr>
<tr>
<td>Total Due</td>
<td>$0.00</td>
</tr>
<tr>
<td>Payments: Card (1111)</td>
<td>Total Charged to Credit Card</td>
</tr>
<tr>
<td>Auth Number: MM/DD/YY</td>
<td>Credit Card Authorization Number</td>
</tr>
<tr>
<td>Amount Paid as of MM/DD/YY</td>
<td>Amount Paid</td>
</tr>
</tbody>
</table>

### Signature Section

I certify that all information provided in relation to this criminal history record check is true and accurate. I authorize both the Pennsylvania State Police (PSP) and/or MorphoTrust LLC to access Pennsylvania and Federal criminal history record information that pertains to me and determine that information to the designated Authorized Agency or Authorized Entity with which I am seeking to be or already are employed by or to serve as a volunteer, as authorized by an applicable state or federal statute or policy. I authorize PSP and/or MorphoTrust LLC to subject my fingerprints to other application information to the 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. I authorize the FBI to disclose potentially pertinent information to the PSP and/or MorphoTrust LLC during the processing of this application and for as long thereafter as may be relevant to the activity for which this application is being submitted. I understand that the FBI may also release my fingerprints and other applicant information in the FBI's permanent collection of fingerprints and related information, where all such data will be subject to controls against other submissions received by the FBI and to further dissemination by the FBI as may be authorized under the Privacy Act of 1974 (5 USC 552a). I understand that my fingerprints will be screened by an against civil, criminal, and talent fingerprints in the Next Generation Identification (NGI) system. I understand that I am entitled to receive a copy of any criminal history record check and challenge the accuracy and completeness of the information before a final determination is made by the Authorized Entity. I also understand the Authorized Entity may deny me access to children or the elderly, or individuals with disabilities until the criminal history record check is completed. If a need arises to challenge the FBI record response, you may contact the agency that submitted the information to the FBI, or you may send a written challenge request to the FBI's Criminal Justice Information Services (CJIS) Division at FBI CJIS Division, Attention: correspondences Group, 1000 Galleria Highway, Clarksburg, WV 26302.

**Signature**

**Date**

### Applicant Contact Information

<table>
<thead>
<tr>
<th>First Name (Last, First, Middle)</th>
<th>Applicant Date of Birth (MM/DD/YYYY)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone Number</td>
<td>Email or Phone 2</td>
</tr>
</tbody>
</table>

### Mail Documents

Please mail the following documents per your specific agency instructions:

1. This printed and signed document.
2. Completed fingerprint card.

**NOTE:** If your agency requires a Social Security number, please be sure to write the number on the fingerprint card or your fingerprints will not be processed and the packet will be returned.