

Applicant Registration for Fingerprinting

Fingerprinting Process for Owners of Personal Care Homes, Assisted Living Communities, Private Home Care Providers, Community Living Arrangements and Administrators/Managers/Directors of Personal Care Homes and Assisted Living Communities

Helpful hints in completing your 3M Cogent Applicant Fingerprint Registration



- The Georgia Bureau of Investigation has contracted with 3M Cogent to conduct live scan fingerprinting on a statewide basis.
- Providers who do not already have an Agency ID [or OAC or GAC] number issued by 3M Cogent must first obtain a number **before** you can register applicants for fingerprinting.
- Fields highlighted in yellow are required.
- **In Step #5, the correct reason for fingerprinting must be chosen. You cannot choose, for example, DCH – Personal Care Home (Owner) when the person being registered for fingerprinting is a Director or an employee. Should this occur, DCH will not issue a fitness determination letter.**
- DCH recommends you complete the “Position Applied for” and email address fields.
- On the 3M Cogent website at <https://www.ga.cogentid.com/index.htm>, click on **Fingerprint Locations** to see vendor, street address, city and telephone number of the live scan fingerprint vendor.
- When the form requests the name of the Agency, you would enter the name of your business or company.
- If you have multiple service locations, you can use the same Agency ID for all entities.
- When you get to Applicant Registration screen under Transaction Information, the first line is the Reviewing Agency ID. This is DCH’s Agency ID – do not edit this field. The second line is the Requesting Agency ID – this is where you enter your Agency ID [or GAC/OAC] number.

NOTE: The screenshots used in this module are based on one example information.

FAQ

1. Click on Applicant Registration

Helpful Links

- Find A Fingerprint Location
- Modify Existing Registration
- Cancel Existing Registration
- Reprint Registration Receipt
- Reprint Fingerprint Submission Receipt
- Refund Policy
- How to Submit Ink Cards
- Sales Inquiry

Welcome to the
Georgia Applicant Processing Service
for fingerprint background requests

Electronic submission of fingerprint images will involve the use of a 3M Cogent Livescan machine. The Livescan captures fingerprint images and demographic data and submits this information to GBI. GBI conducts a search of its criminal history records using the fingerprint images. In some cases, these images are also forwarded to the FBI where a Federal Criminal History Record search is also conducted. Notifications of the search results are then forwarded from the GBI/FBI to 3M Cogent where these results are then electronically disseminated to the Georgia company or agency that requested the search to be completed.

Applicant Registration GAPS Agency Login Become a Requesting Agency

Please Note: Beginning June 17 2015, 3M's commonly used registration link will be changed. A new "pop-up" window will now appear and redirect users from www.cogentid.com to www.aps.3m.com. The new 3M URL contains increased security, and users will experience no change in how registration processing takes place.

Home / Search / FAQ / Fees / Agency Login / Fingerprint Locations / Contact Info / Translate / GCIC / Back

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2. Click on Department of Community Health

To register for a background check, please select one of the options below:

GEORGIA COURT SERVICES (CS)	DEPARTMENT OF EARLY CARE & LEARNING (DECAL)	EDUCATION AGENCIES (EA)
DEPARTMENT OF BEHAVIORAL HEALTH AND DEVELOPMENTAL DISABILITIES (DBHDD)	SECRETARY OF STATE (SOS)	GEORGIA STATE-ONLY BACKGROUND CHECKS (GABC)
DEPARTMENT OF COMMUNITY HEALTH (DCH)	DEPARTMENT OF DRIVER SERVICES (DDS)	CITY/COUNTY GOVERNMENT AND LAW ENFORCEMENT AGENCIES (CCLE)
DEPARTMENT OF PUBLIC HEALTH (DPH)	REAL ESTATE COMMISSION APPRAISERS BOARD (RECAB)	DEPARTMENT OF BANKING AND FINANCE (DBF)
OFFICE OF INSURANCE SAFETY FIRE COMMISSIONER (OIC)	DEPARTMENT OF HUMAN SERVICES (DHS)	GEORGIA BUREAU OF INVESTIGATION (GBI)
DEPARTMENT OF JUVENILE JUSTICE (DJJ)	GEORGIA VOCATIONAL REHABILITATION AGENCY (GVRA)	DEPARTMENT OF DEFENSE

FAQ

3. Click on DCH REGISTRATIONS



The screenshot shows the COGENT Applicant Fingerprinting Online Services website. The browser address bar displays https://ga-aps.3m.com/perlpub/landing_page_2.pl?UserID=&UserType=&agency_group=DCH. The page header includes the COGENT logo and the text "Applicant Fingerprinting Online Services". Below the header is the Department of Community Health logo and name. Two buttons are visible: "DCH REGISTRATIONS" and "AFFORDABLE CARE ACT ONLY". A green arrow points to the "DCH REGISTRATIONS" button.

The Georgia Department of Community Health (DCH) is one of Georgia's four health agencies serving the state's growing population of almost 10 million people. Responsible for a \$12 billion budget for State Fiscal Year 2013, the department is one of the largest agencies in Georgia state government.

Serving as the lead agency for Medicaid and also overseeing the State Health Benefit Plan (SHBP), Healthcare Facility Regulation and Health Information Technology in Georgia, agency programs provide access to health care services for one in four Georgians.

Through effective planning, purchasing and oversight, DCH provides access to affordable, quality health care to millions of Georgians, including some of the state's most vulnerable and underserved populations.

Seven enterprise offices support the work of the agency's four divisions. And more than 600 DCH employees are based in Atlanta, Cordele and across the state.

Clyde Reese serves as Commissioner of the Department of Community Health.

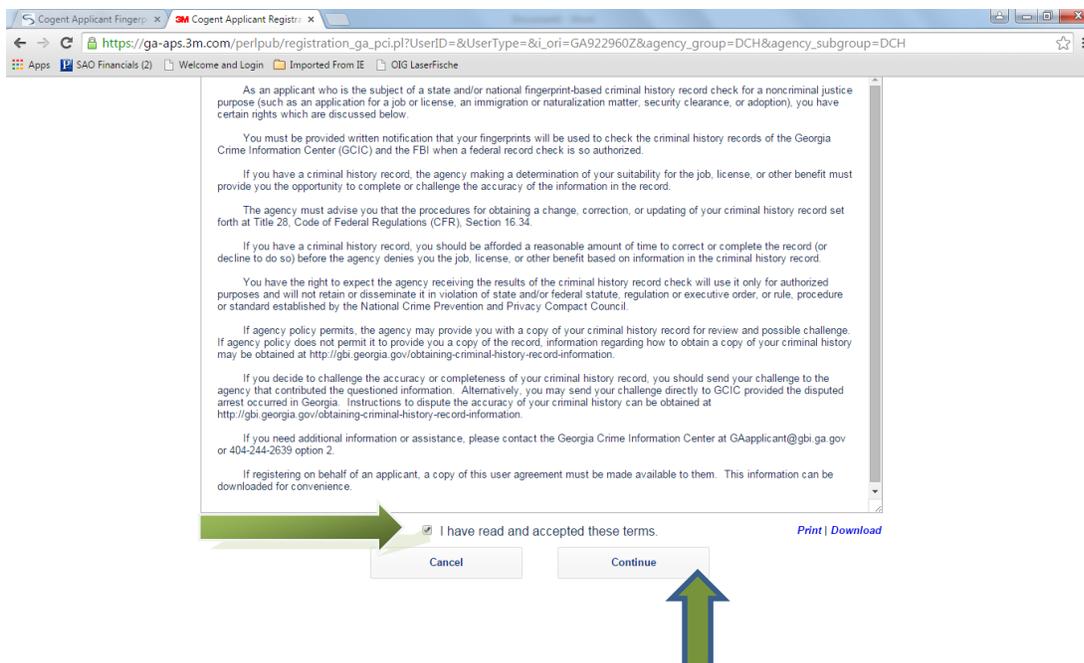
Website:
dch.georgia.gov
dch.georgia.gov/00/channel_title/0_2094_31446711_144156392_00.html

Address:
Two Peachtree St. NW
Atlanta, GA 30303

Contact:
Chris Bennett
(404) 656-0464

Contact:
Denise Matthews
(404) 463-0115

4. Click Box, "I have read and accepted these terms and click 'Continue'"



The screenshot shows the COGENT Applicant Fingerprinting Online Services website displaying a terms and conditions agreement. The browser address bar displays https://ga-aps.3m.com/perlpub/registration_ga_pci.pl?UserID=&UserType=&i_ori=GA922960Z&agency_group=DCH&agency_subgroup=DCH. The page contains several paragraphs of text regarding fingerprinting, criminal history records, and the user's rights. At the bottom of the page, there is a checkbox labeled "I have read and accepted these terms." with a green arrow pointing to it. Below the checkbox are two buttons: "Cancel" and "Continue". A green arrow points to the "Continue" button. There are also "Print" and "Download" links to the right of the checkbox.

As an applicant who is the subject of a state and/or national fingerprint-based criminal history record check for a noncriminal justice purpose (such as an application for a job or license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below.

You must be provided written notification that your fingerprints will be used to check the criminal history records of the Georgia Crime Information Center (GCIC) and the FBI when a federal record check is so authorized.

If you have a criminal history record, the agency making a determination of your suitability for the job, license, or other benefit must provide you the opportunity to complete or challenge the accuracy of the information in the record.

The agency must advise you that the procedures for obtaining a change, correction, or updating of your criminal history record set forth at Title 28, Code of Federal Regulations (CFR), Section 16.34.

If you have a criminal history record, you should be afforded a reasonable amount of time to correct or complete the record (or decline to do so) before the agency denies you the job, license, or other benefit based on information in the criminal history record.

You have the right to expect the agency receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of state and/or federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

If agency policy permits, the agency may provide you with a copy of your criminal history record for review and possible challenge. If agency policy does not permit it to provide you a copy of the record, information regarding how to obtain a copy of your criminal history may be obtained at <http://gbi.georgia.gov/obtaining-criminal-history-record-information>.

If you decide to challenge the accuracy or completeness of your criminal history record, you should send your challenge to the agency that contributed the questioned information. Alternatively, you may send your challenge directly to GCIC provided the disputed arrest occurred in Georgia. Instructions to dispute the accuracy of your criminal history can be obtained at <http://gbi.georgia.gov/obtaining-criminal-history-record-information>.

If you need additional information or assistance, please contact the Georgia Crime Information Center at GAapplicant@gbi.ga.gov or 404-244-2639 option 2.

If registering on behalf of an applicant, a copy of this user agreement must be made available to them. This information can be downloaded for convenience.

I have read and accepted these terms. [Print](#) | [Download](#)

FAQ

5. Applicant Registration. Complete all fields in Yellow including Requesting Agency ID, SSN, Position Applied For and Email Address.

Transaction Information

Reviewing Agency ID:	GA922960Z	Reason:	DCH - Personal Care Home (C)
Requesting Agency ID:	(if different from Reviewing Agency ID)	Position Applied for:	Director of Housekeeping
Payment:	Credit Card	Fingerprint Card User:	<input type="checkbox"/> By Checking this box, you are agreeing to submit all cards to 3M Cogent. See help for details.

Personal Information

Last Name:	SMITH	First Name:	JOHN
Middle Name:		Suffix:	SELECT
Social Security #:	234553434	Re-enter SSN:	234553434
Date of Birth:	01011974	Weight:	150
Sex:	Male	Race:	Black
Eye Color:	Brown	Hair Color:	Black
Height:	6'03	Place of Birth:	FLORIDA
Country of Citizenship:	UNITED STATES	State Driver's License:	GEORGIA
Driver's License #:	123456789		

Address Information

Address:	123 ELM STREET	Address 2:	
City:	ANYTOWN	APT:	

Transaction Information

Reviewing Agency ID:	GA922960Z	Reason:	DCH - Personal Care Home (C)
Requesting Agency ID:	(if different from Reviewing Agency ID)	Position Applied for:	DIRECTOR OF HOUSEKEEPING
Payment:	Credit Card	Fingerprint Card User:	<input type="checkbox"/> By Checking this box, you are agreeing to submit all cards to 3M Cogent. See help for details.

Personal Information

Last Name:	SMITH	First Name:	JOHN
Middle Name:		Suffix:	SELECT
Social Security #:	234553434	Re-enter SSN:	234553434
Date of Birth:	01011974	Weight:	150
Sex:	Male	Race:	Black
Eye Color:	Brown	Hair Color:	Black
Height:	6'03	Place of Birth:	FLORIDA
Country of Citizenship:	UNITED STATES	State Driver's License:	GEORGIA
Driver's License #:	123456789		

Address Information

Address:	123 ELM STREET	Address 2:	
City:	ANYTOWN	APT:	
State:	GEORGIA	Zip:	30300
Phone #:	4041234567	Email:	john.smith@gmail.com

Reset Continue

Note: * Fields in yellow are required. Please note that fingerprinting hours may be different than open store hours. Be sure to confirm the location is fingerprinting before heading down.

Click Continue

FAQ



This is DCH's Agency ID number. Do not change or edit this field.



Enter your Agency ID in this field. This is your OAC or GAC number. Do **not** enter the Reviewing Agency ID in this field.



You must enter the correct Reason for fingerprinting. For example, a Director or Employee of a PCH cannot choose Owner as a Reason or a Private Home Care Provider cannot choose Owner if an Employee is actually being registered for fingerprinting. See Helpful Hints for additional information.



To expedite your review, enter the applicant's SSN, Position Applied For and Email Address.

6. Verify your information and then click Submit.

Applicant Registration
Step 2 - Please Verify Your Information

Transaction Information	
Reviewing Agency:	GA922960Z - DEPT. OF COMMUNITY HEALTH
Reason for Fingerprinting:	DCH - Personal Care Home (Director/Administrator/Manager)
Requesting Agency:	GA922960Z
Position Applied For:	DIRECTOR OF HOUSEKEEPING
Payment Type:	Credit Card
Submitting Ink Cards:	No - You selected electronic fingerprinting
Personal Information	
Last Name:	SMITH
First Name:	JOHN
Middle Name:	NONE
Suffix:	NONE
Social Security #:	234553434
Date of Birth:	01011974 (MMDDYYYY)
Weight:	150
Sex:	Male
Race:	Black
Eye Color:	Brown
Hair Color:	Black
Height:	603
Place of Birth:	FL
Country of Citizenship:	US
Driver's License State:	GA
Driver's License No.:	123456789
Address Information	
Address:	123 ELM STREET
Address 2:	
City:	ANYTOWN
APT:	
State:	GA
Zip:	30300
Phone #:	4041234567
Email:	john.smith@gmail.com

Go Back Submit

FAQ

7. If paying by credit card, enter all the applicable information in the yellow highlighted fields.

Registration Information:
Registration ID: GA157L430389194 Name: JOHN SMITH
Transaction Type: DCH - Personal Care Home (Director/Administrator/Manager)
Transaction Fee: \$51.00

Fields with the yellow background color are required. Important notice regarding failed payments and google toolbar

Credit Card Information

Credit Card Type: Select Card Type (VISA, MASTERCARD, DISCOVER, AMERICAN EXPRESS)
Card Number: [Yellow Highlighted]
Card Security Code (CSC): [Yellow Highlighted]
Expiration Date: Select Month, Select Year
Name As It Appears On Card: [Yellow Highlighted]

Billing Address

Street Address: [Yellow Highlighted]
City: [Yellow Highlighted] State: Select State
Zip Code: [Yellow Highlighted]
Daytime Phone Number: ([Yellow Highlighted]) [Yellow Highlighted] - [Yellow Highlighted] Ext. [Yellow Highlighted]
Email Address: [Yellow Highlighted]

Pay

NOTE: Please do not click the back button of the browser and click only once on the "Pay" button

8. Process for out-of-state owners who prefer to submit a fingerprint card in lieu of being electronically fingerprinted in Georgia

The page at https://ga-aps.3m.com says:
Do you confirm you would like to submit ink cards in lieu of electronic fingerprint and agree to the additional processing fee of \$8?

Transaction Information

Reviewing Agency ID: GA922960Z Reason: DCH - Personal Care Home (E)
Requesting Agency ID: GA922960Z Position Applied for: DIRECTOR OF HOUSEKEEPING
Payment: Credit Card (No unemployment cards, child support cards or gift cards are accepted.) Fingerprint Card User: By checking this box, you are agreeing to submit ink cards to 3M Cogent. See [link](#) for details.

Personal Information

Last Name: SMITH First Name: JOHN
Middle Name: [Yellow Highlighted] Suffix: SELECT
Social Security #: 234563434 Re-enter SSN: 234563434
Date of Birth: 01011974 Weight: 150
Sex: Male Race: Black
Eye Color: Brown Hair Color: Black
Height: 603 Place of Birth: FLORIDA
Country of Citizenship: UNITED STATES State Driver's License: GEORGIA
Driver's License #: 123456789

Address Information

Address: 123 ELM STREET Address 2:
City: ANYTOWN APT:

FAQ

For out-of-state owners, you may want to submit hard copy paper fingerprint cards in lieu of coming to Georgia to be fingerprinted. If you checked the box to indicate you want to submit paper fingerprint cards in lieu of electronic fingerprinting, you will receive the enclosed pop up box in which you agree to submit fingerprint cards for an additional \$8.00 processing fee. Click the Details link for information on submitting paper fingerprint cards.

NOTE: DCH normally receives fingerprint results from live scan machines in 24-48 hours. If you elect to submit manual fingerprint cards, you must go to your local law enforcement agency and have your fingerprints taken on paper cards. You would then submit the fingerprint card (write your Agency ID on back of the card) and attached a copy of your 3M Cogent payment receipt to the card and mail it to the 3M Cogent address listed on the Details link noted above. From the time you mail your fingerprint card to 3M Cogent, it could take up to seven business days for DCH to receive your fingerprint results.

9. The above instructional screen appears when you click the Details link on the Applicant Registration tab if you check the box that you want to submit your fingerprints on paper in lieu of electronically.

The screenshot shows a web browser window with the URL https://www.ga.cogentid.com/GA_DOCS_html/GA_InkCards.htm. The page title is "Georgia Applicant Processing Service" and the sub-header is "Hardcopy Fingerprint Card Submission Instructions". The page content is organized into a table with two main sections: "Overview" and "Process".

Overview	<p>Applicants that are out-of-state, unable to visit an electronic fingerprinting location, or are otherwise unable to be electronically fingerprinted may submit hardcopy fingerprint cards to 3M Cogent.</p> <p>There is an additional \$8.00 fee for processing ink cards.</p>
Process	<p>Applicants who are submitting ink cards for a required Georgia background check should follow the steps below:</p> <p>Register – All applicants must be registered prior to sending hardcopy fingerprint cards. You can register online at www.cogentid.com. Be sure to select the Fingerprint Card User box. Applicants may also contact the Registration Call Center to register by phone: 1-888-439-2512</p> <p>Payment – Payment may be made online or a money order can be sent with your fingerprint card:</p> <p><i>Option 1: Online Payment</i> – Applicants may pay online at the time of registration using a credit/debit card, or the transaction may be billed to your employer using "agency pay."</p> <p><i>Option 2: Send payment with Fingerprint Card</i> – Money order only. Cash and personal checks are not accepted.</p> <p>Registration ID - All applicants will receive a Registration ID. Write this number on the back of your fingerprint cards.</p> <p>Submission – Mail the cards (and if applicable, payment) to:</p> <p>3M Cogent, Georgia CardScan</p>

FAQ



GEORGIA DEPARTMENT
OF COMMUNITY HEALTH

Cogent Applicant Finger: x Hardcopy Card Submissio: x

https://www.ga.cogentid.com/GA_DOCS_html/GA_InkCards.htm

Apps SAO Financials (2) Welcome and Login Imported From IE OIG LaserFische

Process	<p>There is an additional \$8.00 fee for processing ink cards.</p>
	<p>Applicants who are submitting ink cards for a required Georgia background check should follow the steps below:</p> <p>Register – All applicants must be registered prior to sending hardcopy fingerprint cards. You can register online at www.cogentid.com. Be sure to select the Fingerprint Card User box. Applicants may also contact the Registration Call Center to register by phone: 1-888-439-2512</p> <p>Payment – Payment may be made online or a money order can be sent with your fingerprint card.</p> <p><i>Option 1: Online Payment</i> – Applicants may pay online at the time of registration using a credit/debit card, or the transaction may be billed to your employer using "agency pay."</p> <p><i>Option 2: Send payment with Fingerprint Card</i> – Money order only. Cash and personal checks are not accepted.</p> <p>Registration ID - All applicants will receive a Registration ID. Write this number on the back of your fingerprint cards.</p> <p>Submission – Mail the cards (and if applicable, payment) to:</p> <p>3M Cogent, Georgia CardScan 5025 Bradenton Avenue, Suite A Dublin, OH 43016</p> <p>Results – Background check results will be sent directly to your employer. 3M Cogent does not have access to background check results or make employment determinations. Please check with your employer regarding questions about your background check results.</p>