

Fingerprinting Instructions: The Online Application

Navigate to www.daontis.com/DOHMQA to set up an account and to schedule an appointment

Set up an account

To get started, please enter the information. Fields that are titled in **bold** are required. If you already have an account, [login now](#). During the registration process, you will be asked to provide two numbers: an ORI number and a valid credit card number. Please have both available before you proceed. Note that your ORI will be given to you by your employer. Once you have started the registration process, **DO NOT HIT THE BACK BUTTON at any point**; doing so will require you to restart the entire process. Any incorrect information can be updated once the registration process is complete.

First Name:

Last Name:

Email Address:

Re-enter Email Address:

Username:

Username should be at least 6 characters long

Password requirements

- At least 4 characters long
- Must contain at least one alphabet, a number and a special character
- Cannot be the same as the username
- We recommend using both upper and lower case characters.

Password:

password is strong

Re-enter Password:

Valid examples of phone number:

- (123) 456-7890
- 123-456-7890
- 1234567890
- (123) 456-7890 x123

Phone Number:



RESET

START

Enter biographic data to set up a DTIS account. Create a DTIS username and password. Then click "Start"

Make an Appointment

Check Status

Find a Location


FAQ's

Contact Us

Login

Español

Please log in with the Username and Password you created.

close 

Username:

[Forgot Username?](#)

Password:

[Forgot Password?](#)

RESET

LOG IN

Enter the user name and password that you just created.

[Make an Appointment](#)[Check Status](#)[Find a Location](#)[FAQ's](#)[Contact Us](#)[Logout](#)

DTIS Online Privacy Statement

Please read, and accept this Privacy Statement to proceed.

Daon Trusted Identity Services (DTIS) is collecting biographical information from you as approved by FDLE for the purpose of submitting a complete fingerprint file to the Federal Bureau of Investigation (FBI). DTIS will securely transmit and store all information collected on this system. We are authorized to disclose this information to FDLE, our partners within this contract and to the Department of Justice for civil and criminal investigation.

The estimated average time to complete this form is 15 minutes. This average includes all associated forms. If you have comments concerning the accuracy of this time estimate or suggestions for making this form simpler, we will be happy to hear from you. Please go to the Contact Us page to provide your comments to us.

Do you accept the privacy policy?

Accept the Privacy Policy in order to proceed

Make an Appointment

Check Status

Find a Location

FAQ's

Contact Us

Logout


Select the program that you're applying for:


When you select the program, the ORI list will be populated with a list of ORIs for that program. Select the ORI that your requesting agency or employer has provided to you. *(If you are a college student and your school is the requesting agency, the college or Certified Background will provide your ORI.)* Since the ORI is typically specific to each individual, we are unable to provide this information.


If you know your ORI and it is not listed [click here](#) to contact Customer Support so that it may be added.

OCA is the Originating Agency Case number. If you don't have one you can leave this field blank. However, the DCF program does require an OCA. For the AHCA program, if you have a Medicaid Process ID, you may enter it here.

Attention To: is where you specify who gets the results of your background check. This field is optional.

Program: 

ORI: 

Reason: 

OCA:

Attention To:

RESET

CONTINUE

Department of Health will be the only Program option available. You must the select your ORI number and select the Reason that you are being fingerprinted.

[Make an Appointment](#)[Check Status](#)[Find a Location](#)[FAQ's](#)[Contact Us](#)[Logout](#)**Optional Photo**

You have selected an ORI for which you'll need to capture your photo. You could opt not to have your photo taken. Would you like to have your photo taken?

Have photo taken? Yes No

[RESET](#)[SAVE](#)

Confirm that you are having your photo taken

Make an Appointment

Check Status

Find a Location

FAQ's

Contact Us

Logout

Confirm ORI selection

Please confirm that the ORI information you have selected is correct.

ORI you selected : **EAHCA020Z**

Failure to select the correct ORI number for your program may result in significant delays and additional charges before you can receive your results. If you are unsure of this information please contact the Agency you are being fingerprinted for at the link below before proceeding.

AHCA

Contact the Background Screening section at 850-412-4503 or email bgscreen@ahca.myflorida.com

DBPR

Customer Contact Center (CCC) can be reached at 850.487.1395. The CCC hours of operations are Monday-Friday, 8 a.m. - 6 p.m. Eastern Time.

DOE

U.S. Domestic Toll-Free Number: 800-445-6739; Outside U.S.: 850-245-5049; The Bureau of Educator Certification provides an automated telephone inquiry service for teachers through use of a touch-tone telephone. This automated service is now available by telephone anytime except from 1:00 am - 4:00 am each day

DCF

[Click here](#) to find your Regional Contact

CHANGE ORI

PROCEED

Confirm that the ORI that you selected is correct.

Make an Appointment

Check Status

Find a Location

FAQ's

Contact Us

Logout

Biographic Information

Fields that are titled in **bold** are required.

Prefix:

Examples: Mr Mrs Ms Miss Dr

First Name:

Middle Name:

Last Name:

Suffix:

Examples: Sr Jr I II III MD

E-mail Address:

RESET

CONTINUE

Your name and email address will self-populate. The Prefix and Suffix are optional; click Continue to proceed.

Make an Appointment

Check Status

Find a Location

FAQ's

Contact Us

Logout

Biographic Information

Fields that are titled in **bold** are required.

Residence

Address Line 1:

Address Line 2:

City:

State:

Zip:

RESET

CONTINUE

Enter the address of your current residence; click Continue to proceed.

[Make an Appointment](#)[Check Status](#)[Find a Location](#)[FAQ's](#)[Contact Us](#)[Logout](#)

Biographic Information

Fields that are titled in **bold** are required. **DO NOT HIT THE BACK BUTTON at any point**; doing so will require you to restart the entire process. Any incorrect information can be updated once the registration process is complete.

Occupation:

Employer:

Employer Address

Line 1:

Employer Address

Line 2:

Employer City:

Employer State:



Employer Zip:

[RESET](#)[CONTINUE](#)

Enter the name and address of your employer. Click Continue to proceed.

- Make an Appointment
- Check Status
- Find a Location
- FAQ's
- Contact Us
- Logout

Biographic Information

Fields that are titled in **bold** are required.

Sex: Male Female

Date of Birth: Feb 21 1980

Place of Birth: Florida

Race: White

Height: 5 ft 8 in

Weight: 120 lbs

Eye Color: Brown

Hair Color: Blue

Country of Citizenship: United States of America

Social Security Number: 123-45-6789

RESET CONTINUE

Enter your biographic information; click Continue to proceed.

Make an Appointment

Check Status

Find a Location

FAQ's

Contact Us

Logout

Biographic Information

Fields that are titled in **bold** are required.

Alias 1 First Name:

Alias 1 Middle Name:

Alias 1 Last Name:

Alias 2 First Name:

Alias 2 Middle Name:

Alias 2 Last Name:

Alias 3 First Name:

Alias 3 Middle Name:

Alias 3 Last Name:

RESET

CONTINUE

Enter any alias information (if applicable); click Continue to proceed.

- Make an Appointment
- Check Status
- Find a Location
- FAQ's
- Contact Us
- Logout

Please verify that the information submitted is accurate

If there are any errors listed below, you won't be able to proceed, till you correct them. To correct any errors, or to change any entries, please click on the "MAKE CHANGES" button at the bottom of the page.

Name	WASHINGTON, GEORGE	✓
E-mail Address	KRISTY.SUMNER@DAONTIS.COM	✓
Residence Address	123 MAIN ST ANYWHERE, ORLANDO, FL 33333	✓
Occupation	SUMMER CAMP EMPLOYEE	✓
Employer	ST EDWARDS, , ,	✓
Sex	Female	✓
Place of Birth	Florida	✓
Height	5 ft 8 in	✓
Weight	150 lbs	✓
Eye Color	Blue	✓
Hair Color	Blonde	✓
Country of Citizenship	United States of America	✓
Social Security Number		
Alias 1		
Alias 2		
Alias 3		

MAKE CHANGES PROCEED

Verify that the information that you entered is correct. Make changes if necessary. Click Proceed to continue.

Make an Appointment

Check Status

Find a Location

FAQ's

Contact Us

Logout

Select The UPS Store location where you would prefer to get fingerprinted

The UPS Store™ 

Store locator

2046 Treasure Coast Plaza, Vero Beach FL 32960

RESET


SELECT

From the drop down box, selection the Location where you would like to get fingerprinted.



Make an Appointment
Check Status
Find a Location
FAQ's
Contact Us
Logout

Payment
Please pay the amount of **\$84.50**

Fields that are titled in **bold** are required.

Card Type: 

Card Number: No dashes or spaces required

Expiration Month/Year:  

CVV: [What is CVV?](#)

Use applicant information

First Name:


Last Name:

Email:

Address Line 1:

Address 2:

City:

State: 

Zip:

RESET

PAY

Enter your credit card information to make you payment.

The UPS Store

Welcome to the UPS Store's online fingerprint scheduling service.

This application will allow you to schedule a fingerprinting appointment with a Trusted Agent at a selected UPS Store.

The following page will present you with a calendar and available time slots for the UPS Store you've selected. By clicking on an available timeslot, you will be asked to confirm your appointment.

Time slots that are grayed-out are not available for scheduling because a Trusted Agent will not be available to process your fingerprinting.

Please click the continue button below to proceed with scheduling an appointment.

Continue

Click Continue to proceed the Appointment Scheduler.

		May 06, 2012 - May 12, 2012				
Today		Sunday May 06, 2012	Monday May 07, 2012	Tuesday May 08, 2012	Wednesday May 09, 2012	Thursday May 10, 2012
9am						
10am						
11am						
12pm						

Available dates and times will be in White. Pick a day and time that works best for you. You can see additional days/weeks by clicking on the arrow next to "Today" in the upper left-hand corner.

UPS Store Scheduler for 2046 Treasure Coast Plaza, Vero Beach, FL

<< today >>

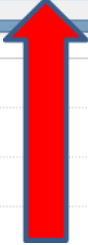
Mar 31, 2013 - Apr 06, 2013

	Sunday Mar 31, 2013	Monday Apr 01, 2013	Tuesday Apr 02, 2013	Wednesday Apr 03, 2013	Thursday Apr 04, 2013	Friday Apr 05, 2013
9AM						
10AM						
11AM						

Message from webpage

Do you want to make an appointment for:
Wednesday Apr 03, 2013 at 09:15 am
to
Wednesday Apr 03, 2013 at 09:30 am

OK Cancel




Confirm your selected date and time.


for 2046 Treasure Coast Plaza, Vero Beach, FL

Mar 31, 2013 - Apr 06, 2013

Monday Apr 01, 2013	Tuesday Apr 02, 2013	Wednesday Apr 03, 2013	Thursday Apr 04, 2013	Friday Apr 05, 2013

Message from webpage ×

 Your appointment has been booked.



Confirm that your appointment has been booked.

Make an Appointment

Check Status

Find a Location

FAQ's

Contact Us

Logout

Receipt

Your appointment has been scheduled

GEORGE WASHINGTON

Your appointment is scheduled for April 3, 2013 at 9:15 AM

The UPS Store
2046 Treasure Coast Plaza
Vero Beach FL 32960
Phone: 772-569-2400



If the barcode doesn't display above, please provide this number when you go get fingerprinted - **674021888983**.

PRINT



You will get a receipt with a bar code. The receipt will also be emailed to you. **PRINT YOUR RECEIPT** and take it with you when you go to your fingerprint appointment. You will also need to take a government issued, photo ID to the appointment was well.