



GEORGIA GAPS: Fieldprint Scheduling USER GUIDE

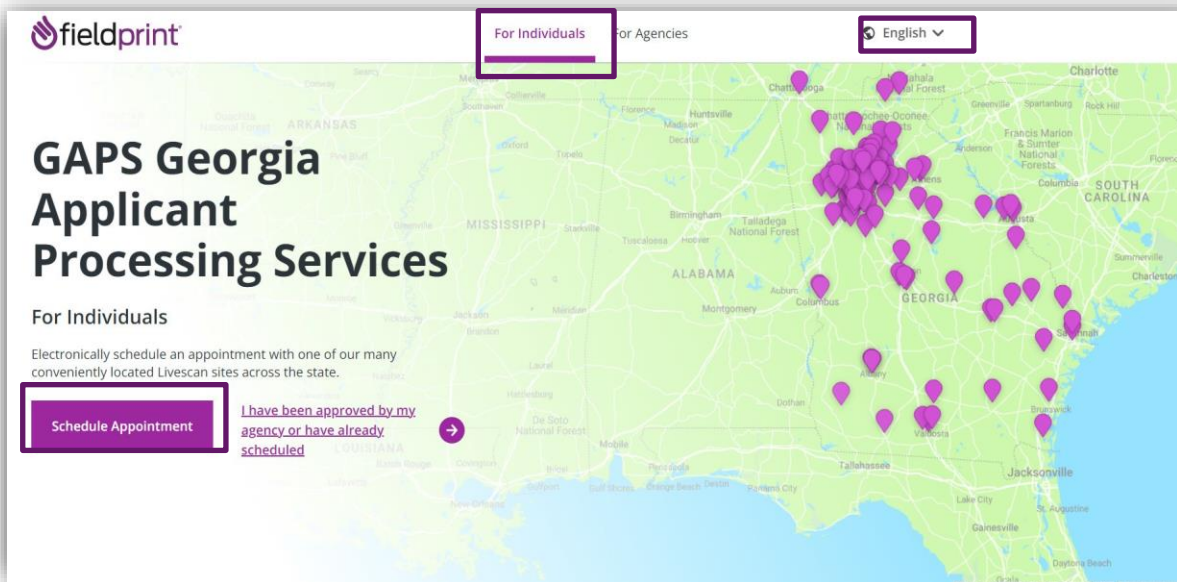
EMPOWERED BY  VERTICAL SCREEN

Proprietary information. Property of Fieldprint, Inc.
This confidential information is not to be shared with any party outside of
your department/company without the written consent of Fieldprint, Inc.

Fieldprint maintains a specific website to support Georgia’s Applicant Processing System. This site will not only allow applicants to register online and schedule a fingerprint appointment, but also guide entities through the necessary steps to sign up to become a requesting agency.

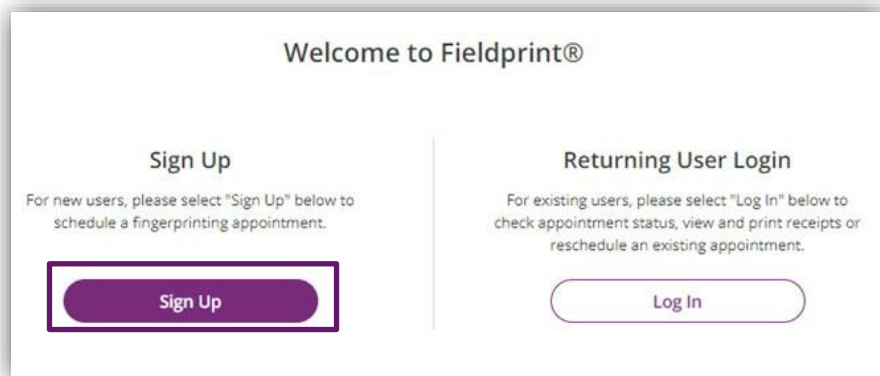
Getting Started

To begin scheduling go to <https://www.fieldprintgeorgia.com>, also viewable in Spanish by clicking the language dropdown. This site will provide valuable information about the fingerprinting process, helpful FAQs, and contact information. To get started, click **Schedule Appointment** under the **For Individuals** page.

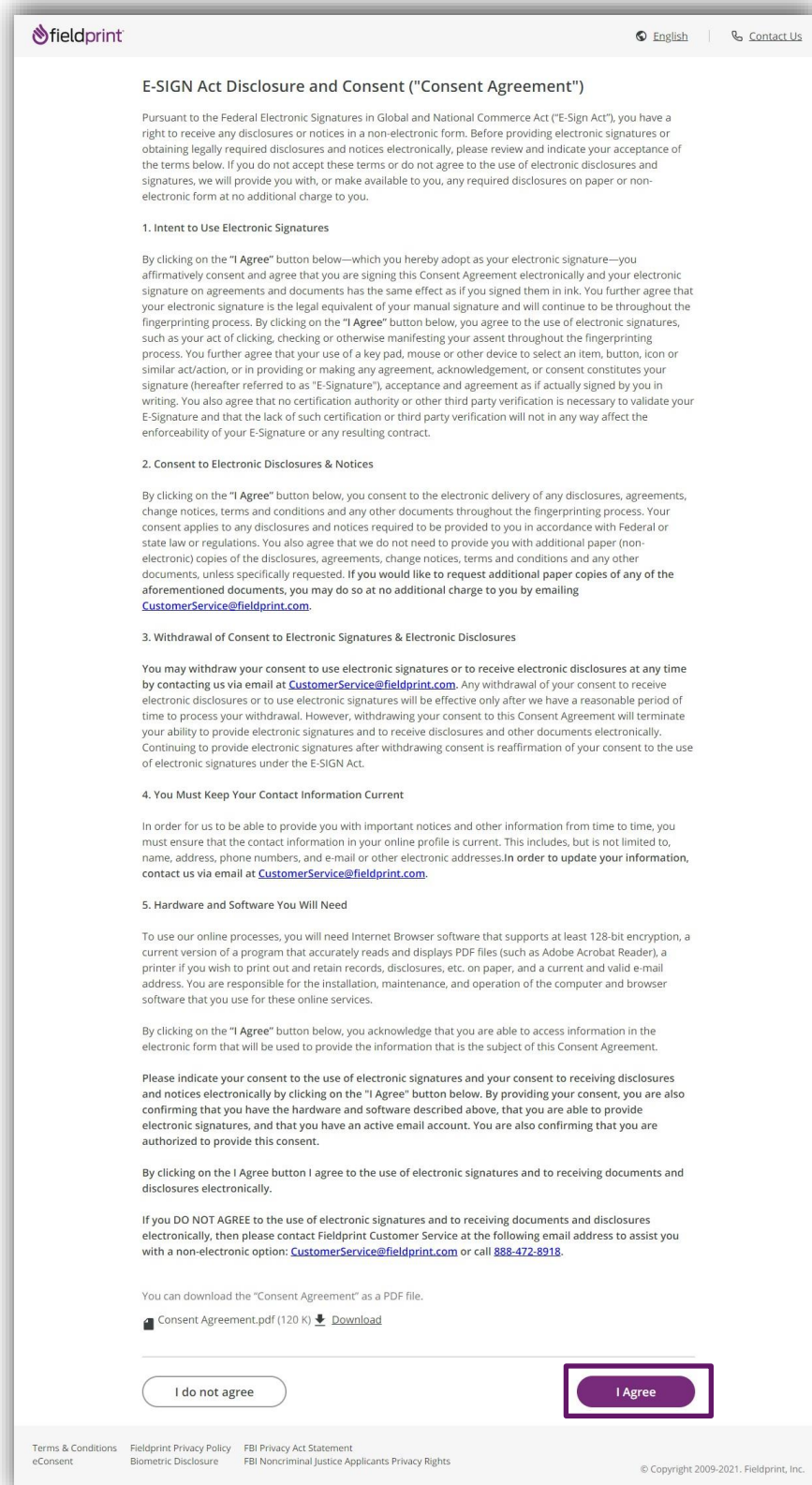


Creating a User Profile

New users need to create a new user account by clicking **Sign Up**. The Sign Up wizard will walk you through the steps to set up an account, culminating in a verified account that will be used to schedule fingerprints. Returning users can simply **Log In**.



Read over the E-SIGN Act Disclosure and Consent (“**Consent Agreement**”) and click **I Agree**.



The screenshot shows a web page titled "E-SIGN Act Disclosure and Consent ('Consent Agreement')". The page includes a fieldprint logo, language and contact options, and five numbered sections of text. At the bottom, there are two buttons: "I do not agree" and "I Agree".

E-SIGN Act Disclosure and Consent ("Consent Agreement")

Pursuant to the Federal Electronic Signatures in Global and National Commerce Act ("E-Sign Act"), you have a right to receive any disclosures or notices in a non-electronic form. Before providing electronic signatures or obtaining legally required disclosures and notices electronically, please review and indicate your acceptance of the terms below. If you do not accept these terms or do not agree to the use of electronic disclosures and signatures, we will provide you with, or make available to you, any required disclosures on paper or non-electronic form at no additional charge to you.

1. Intent to Use Electronic Signatures

By clicking on the "I Agree" button below—which you hereby adopt as your electronic signature—you affirmatively consent and agree that you are signing this Consent Agreement electronically and your electronic signature on agreements and documents has the same effect as if you signed them in ink. You further agree that your electronic signature is the legal equivalent of your manual signature and will continue to be throughout the fingerprinting process. By clicking on the "I Agree" button below, you agree to the use of electronic signatures, such as your act of clicking, checking or otherwise manifesting your assent throughout the fingerprinting process. You further agree that your use of a key pad, mouse or other device to select an item, button, icon or similar act/action, or in providing or making any agreement, acknowledgement, or consent constitutes your signature (hereafter referred to as "E-Signature"), acceptance and agreement as if actually signed by you in writing. You also agree that no certification authority or other third party verification is necessary to validate your E-Signature and that the lack of such certification or third party verification will not in any way affect the enforceability of your E-Signature or any resulting contract.

2. Consent to Electronic Disclosures & Notices

By clicking on the "I Agree" button below, you consent to the electronic delivery of any disclosures, agreements, change notices, terms and conditions and any other documents throughout the fingerprinting process. Your consent applies to any disclosures and notices required to be provided to you in accordance with Federal or state law or regulations. You also agree that we do not need to provide you with additional paper (non-electronic) copies of the disclosures, agreements, change notices, terms and conditions and any other documents, unless specifically requested. If you would like to request additional paper copies of any of the aforementioned documents, you may do so at no additional charge to you by emailing CustomerService@fieldprint.com.

3. Withdrawal of Consent to Electronic Signatures & Electronic Disclosures

You may withdraw your consent to use electronic signatures or to receive electronic disclosures at any time by contacting us via email at CustomerService@fieldprint.com. Any withdrawal of your consent to receive electronic disclosures or to use electronic signatures will be effective only after we have a reasonable period of time to process your withdrawal. However, withdrawing your consent to this Consent Agreement will terminate your ability to provide electronic signatures and to receive disclosures and other documents electronically. Continuing to provide electronic signatures after withdrawing consent is reaffirmation of your consent to the use of electronic signatures under the E-SIGN Act.

4. You Must Keep Your Contact Information Current

In order for us to be able to provide you with important notices and other information from time to time, you must ensure that the contact information in your online profile is current. This includes, but is not limited to, name, address, phone numbers, and e-mail or other electronic addresses. In order to update your information, contact us via email at CustomerService@fieldprint.com.

5. Hardware and Software You Will Need

To use our online processes, you will need Internet Browser software that supports at least 128-bit encryption, a current version of a program that accurately reads and displays PDF files (such as Adobe Acrobat Reader), a printer if you wish to print out and retain records, disclosures, etc. on paper, and a current and valid e-mail address. You are responsible for the installation, maintenance, and operation of the computer and browser software that you use for these online services.


By clicking on the "I Agree" button below, you acknowledge that you are able to access information in the electronic form that will be used to provide the information that is the subject of this Consent Agreement.

Please indicate your consent to the use of electronic signatures and your consent to receiving disclosures and notices electronically by clicking on the "I Agree" button below. By providing your consent, you are also confirming that you have the hardware and software described above, that you are able to provide electronic signatures, and that you have an active email account. You are also confirming that you are authorized to provide this consent.

By clicking on the I Agree button I agree to the use of electronic signatures and to receiving documents and disclosures electronically.

If you DO NOT AGREE to the use of electronic signatures and to receiving documents and disclosures electronically, then please contact Fieldprint Customer Service at the following email address to assist you with a non-electronic option: CustomerService@fieldprint.com or call **888-472-8918**.

You can download the "Consent Agreement" as a PDF file.

 Consent Agreement.pdf (120 K) [Download](#)

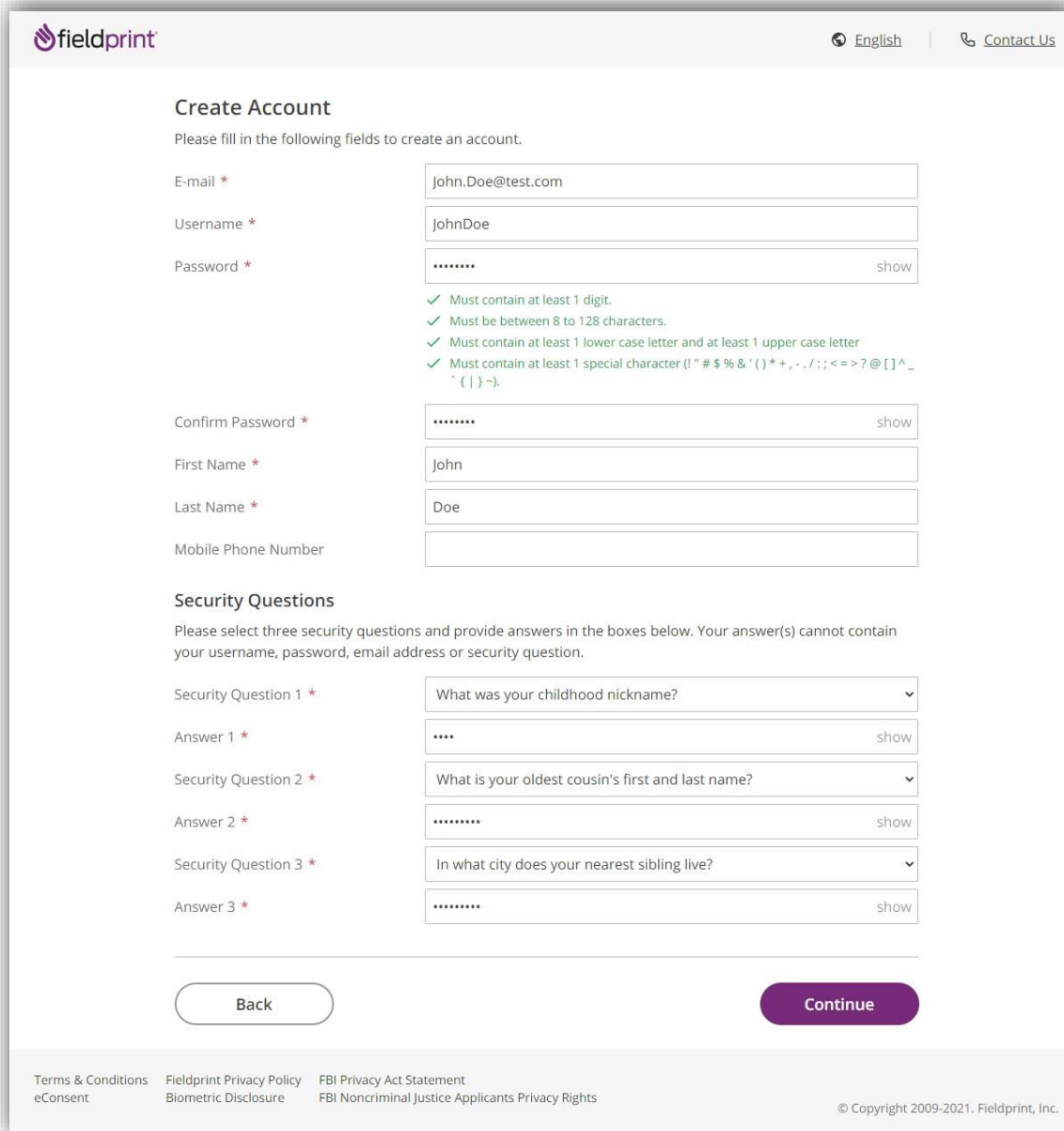
Terms & Conditions | Fieldprint Privacy Policy | FBI Privacy Act Statement
eConsent | Biometric Disclosure | FBI Noncriminal Justice Applicants Privacy Rights

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The next page will prompt you to create your account. You will need to enter your e-mail address, first name, and last name, and set your password. Passwords must be between 8-128 characters long, must contain one number, one capital letter, one lower case letter, and one special character. Passwords are case-sensitive. The password rules are provided on the Sign Up page for reference.

You will also be prompted to enter three security questions and their answers. This will be used to verify your identity in the event that you forget the password in the future. The questions must be from the preset list and you cannot provide the same question or answer twice.

Enter all required fields and click **Continue** to move forward.



fieldprint English Contact Us

Create Account

Please fill in the following fields to create an account.

E-mail *

Username *

Password * show

- ✓ Must contain at least 1 digit.
- ✓ Must be between 8 to 128 characters.
- ✓ Must contain at least 1 lower case letter and at least 1 upper case letter
- ✓ Must contain at least 1 special character (! " # \$ % & ') * + , - . / : ; < = > ? @ [] ^ _ ` { | } ~).

Confirm Password * show

First Name *

Last Name *

Mobile Phone Number

Security Questions

Please select three security questions and provide answers in the boxes below. Your answer(s) cannot contain your username, password, email address or security question.

Security Question 1 *

Answer 1 * show

Security Question 2 *

Answer 2 * show

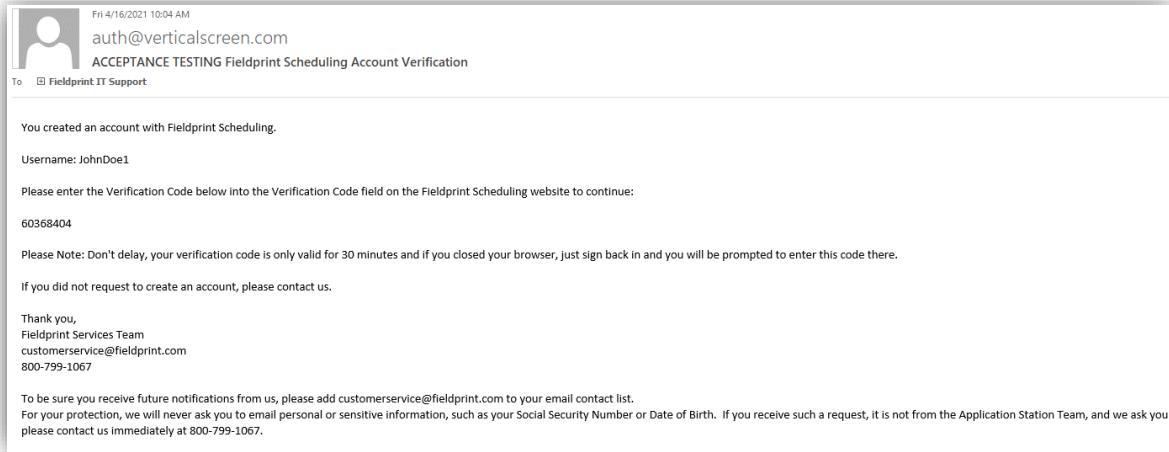
Security Question 3 *

Answer 3 * show

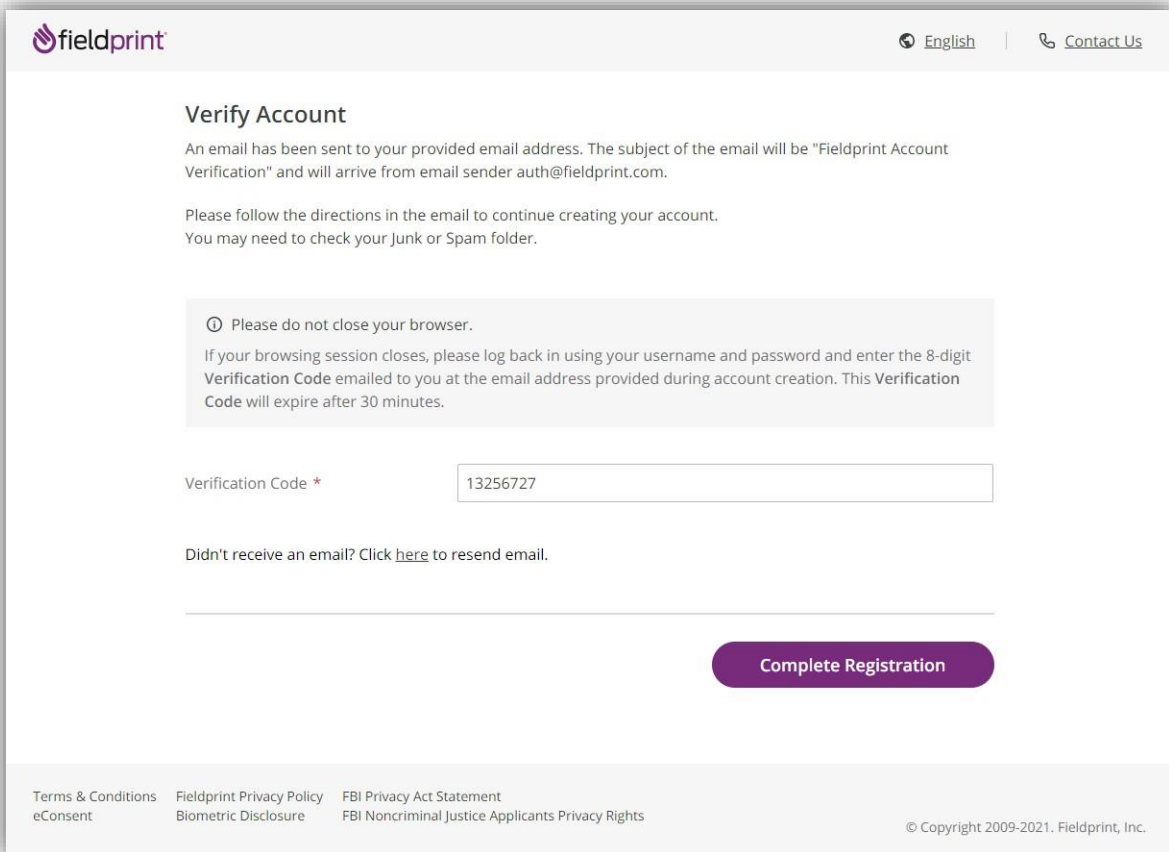
Terms & Conditions eConsent | Fieldprint Privacy Policy Biometric Disclosure | FBI Privacy Act Statement | FBI Noncriminal Justice Applicants Privacy Rights

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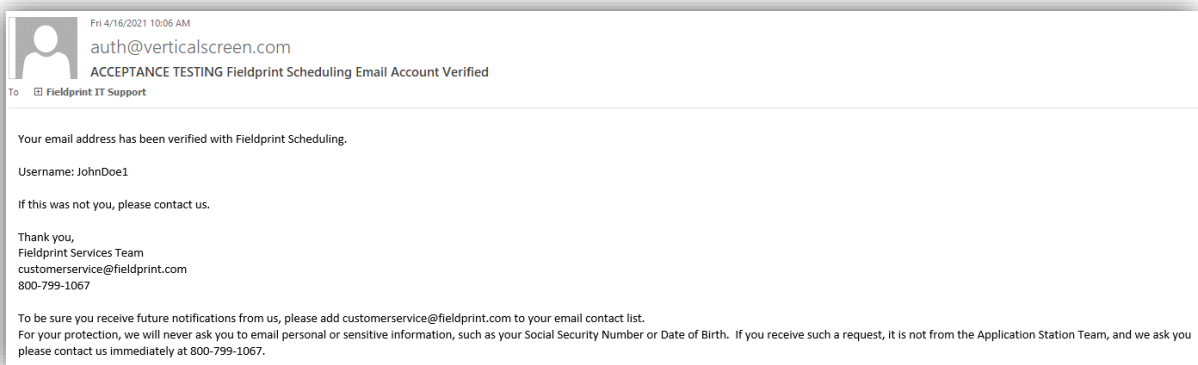
An email will be sent to your provided email address. Check your email for the verification code and enter it on the next page. Do not close your browser. The code will expire after 30 minutes. See below for an example of the email that will be sent.



Enter the code from the email and click **Complete Registration** to move forward.

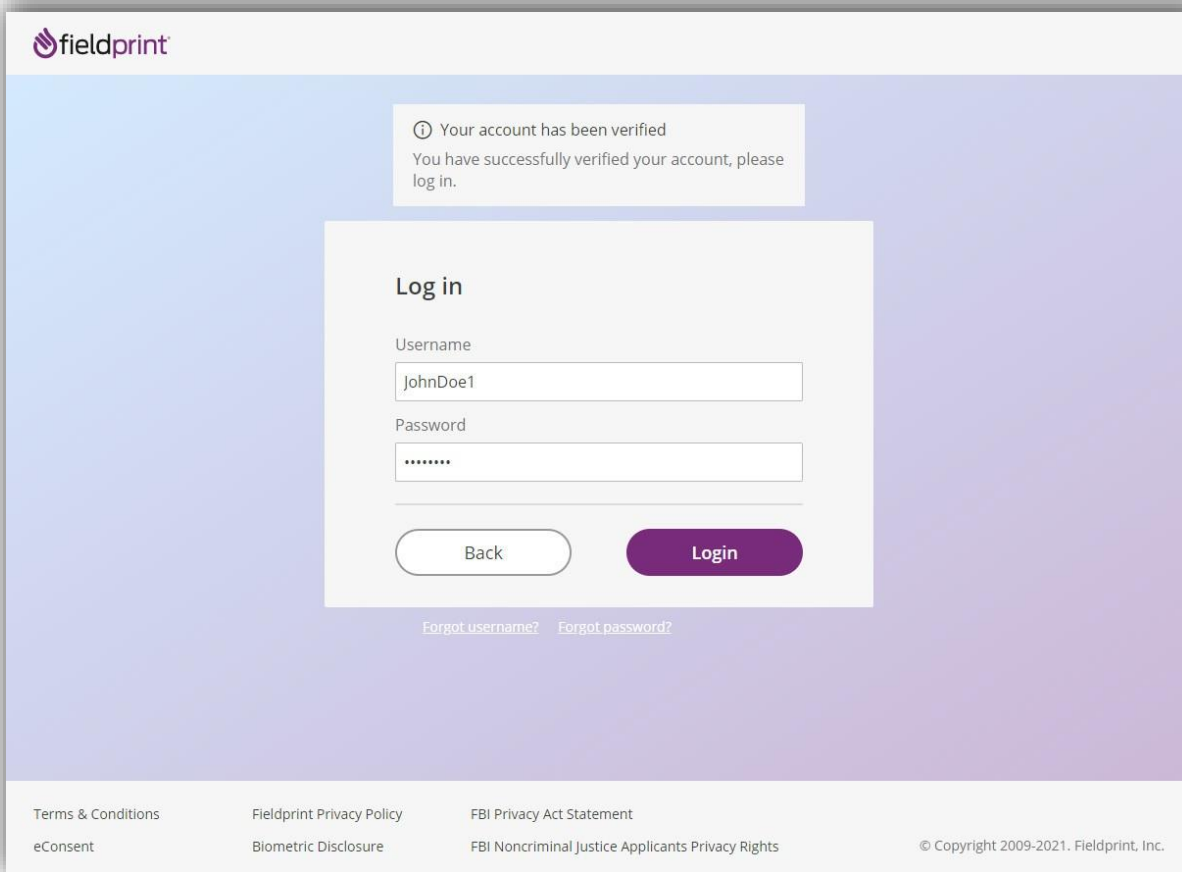


You will also receive an email confirming that your email address has been verified.



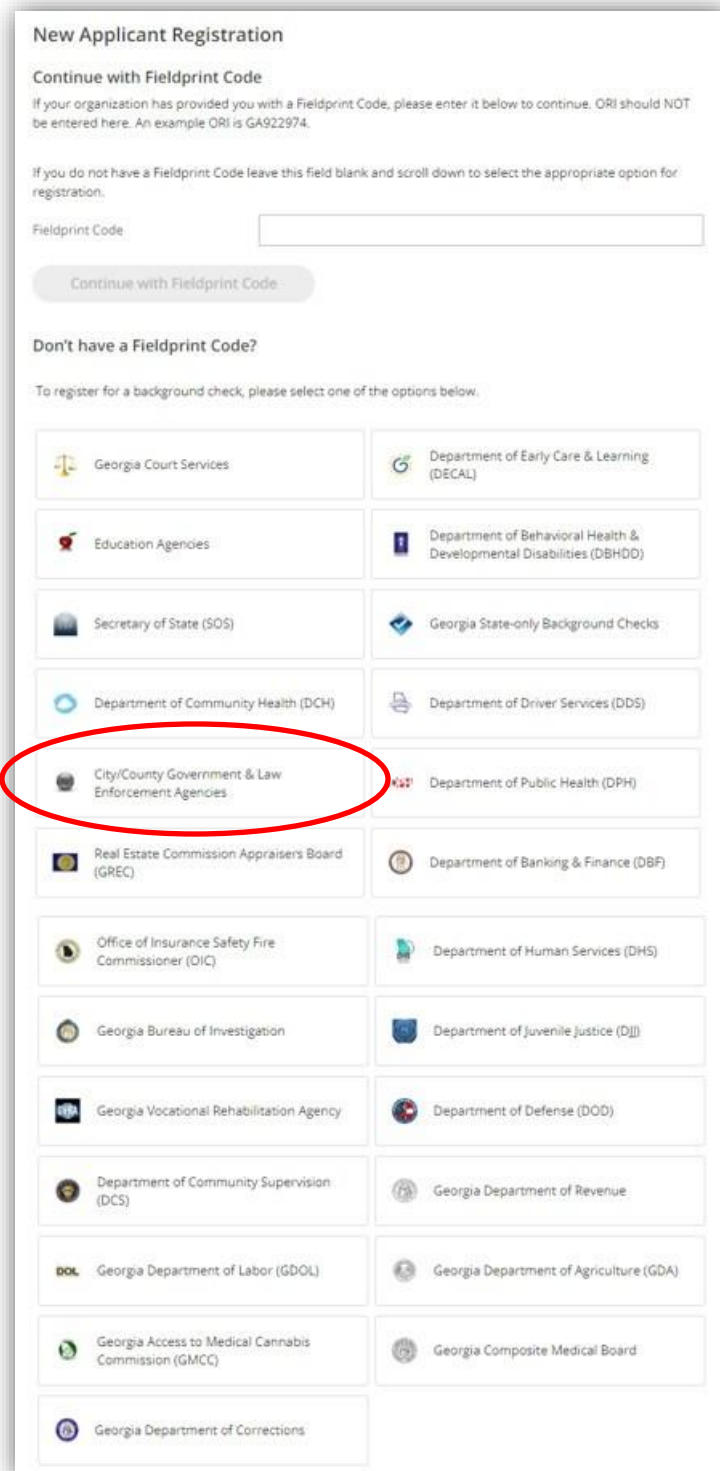
Once your account has been verified, you will be able to log in to the Fieldprint scheduling site using your credentials.

: You may retrieve your username or password should you forget them by using the “Forgot username?” or “Forgot password” buttons.



New Applicant Registration

You will have a choice to enter either a **Fieldprint Code** (if provided by your employer or organization) or select the appropriate agency from the tiles provided below the Fieldprint code.



New Applicant Registration

Continue with Fieldprint Code

If your organization has provided you with a Fieldprint Code, please enter it below to continue. ORI should NOT be entered here. An example ORI is GA922974.


























If you do not have a Fieldprint Code leave this field blank and scroll down to select the appropriate option for registration.

Fieldprint Code

Continue with Fieldprint Code

Don't have a Fieldprint Code?

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

 Georgia Court Services	 Department of Early Care & Learning (DECAL)
 Education Agencies	 Department of Behavioral Health & Developmental Disabilities (DBHDD)
 Secretary of State (SOS)	 Georgia State-only Background Checks
 Department of Community Health (DCH)	 Department of Driver Services (DDS)
 City/County Government & Law Enforcement Agencies	 Department of Public Health (DPH)
 Real Estate Commission Appraisers Board (GREC)	 Department of Banking & Finance (DBF)
 Office of Insurance Safety Fire Commissioner (OIC)	 Department of Human Services (DHS)
 Georgia Bureau of Investigation	 Department of Juvenile Justice (DJJ)
 Georgia Vocational Rehabilitation Agency	 Department of Defense (DOD)
 Department of Community Supervision (DCS)	 Georgia Department of Revenue
 Georgia Department of Labor (GDOL)	 Georgia Department of Agriculture (GDA)
 Georgia Access to Medical Cannabis Commission (GMCC)	 Georgia Composite Medical Board
 Georgia Department of Corrections	

If you select an agency, you could be asked to specify the reason and Requesting Agency (if applicable). Useful links to resources for that agency are located at the bottom of the page.

City/County Government and Law Enforcement Agencies

Alcohol and Liquor License	Courts
Firefighter	Law Enforcement Agencies
Local County Health Districts	Ordinances
Other	

PROP

City/County Government and Law Enforcement Agencies

* — Required Fields

Alcohol and Liquor License	Courts
Firefighter	Law Enforcement Agencies
Local County Health Districts	Ordinances
Other	

Reason for Fingerprinting*

Alcohol/Liquor Licensee

Reviewing Agency ID*

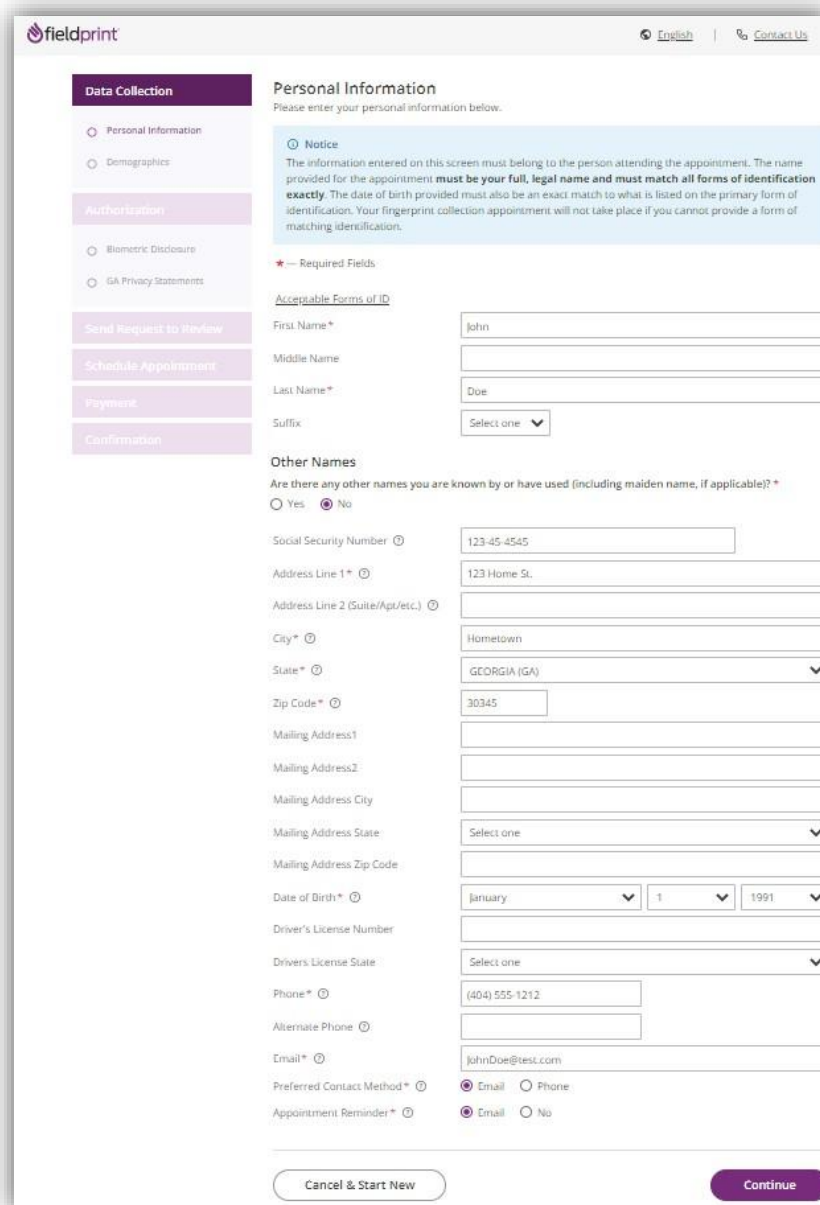
GA923224Z

Requesting Agency ID

Data Collection

You will begin the Data Collection process by entering in all required **Personal Information**. Ensure that the information entered is consistent with the IDs you will be presenting at fingerprinting. A list of acceptable forms of ID is linked at the top of the page. This information should match what is on file with your Georgia agency, and discrepancies with this information could result in delays. Data fields are consistent with GBI and FBI standards.

You can enter in aliases by selecting Yes under Other Names. At the bottom, the preferred contact method will allow Fieldprint to reach you in the event of an issue. You may also elect to have an appointment reminder. Once all information is entered, click **Continue**.



The screenshot shows the 'Personal Information' form in the Fieldprint system. The form includes a sidebar with navigation options: Data Collection (selected), Personal Information, Demographics, Authorization, Biometric Disclosure, GA Privacy Statements, Send Request to Review, Schedule Appointment, Payment, and Confirmation. The main content area is titled 'Personal Information' and contains a 'Notice' box, a 'Required Fields' section, and various input fields. The 'Notice' box states that the information must belong to the person attending the appointment and that the name must be the full, legal name. The 'Required Fields' section includes a link to 'Acceptable Forms of ID'. The form fields are as follows:

- First Name*: John
- Middle Name: (empty)
- Last Name*: Doe
- Suffix: Select one (dropdown)
- Other Names: Are there any other names you are known by or have used (including maiden name, if applicable)?* Yes No
- Social Security Number: 123-45-4545
- Address Line 1*: 123 Home St.
- Address Line 2 (Suite/Apt/etc.): (empty)
- City*: Hometown
- State*: GEORGIA (GA) (dropdown)
- Zip Code*: 30345
- Mailing Address1: (empty)
- Mailing Address2: (empty)
- Mailing Address City: (empty)
- Mailing Address State: Select one (dropdown)
- Mailing Address Zip Code: (empty)
- Date of Birth*: January (dropdown), 1 (dropdown), 1991 (dropdown)
- Driver's License Number: (empty)
- Driver's License State: Select one (dropdown)
- Phone*: (404) 555-1212
- Alternate Phone: (empty)
- Email*: johnDoe@test.com
- Preferred Contact Method*: Email Phone
- Appointment Reminder*: Email No

At the bottom of the form, there are two buttons: 'Cancel & Start New' and 'Continue'.

Next, enter all **Demographics** required for the fingerprint check.

Demographics
Please complete the following questions. This information is used to positively identify you when performing a fingerprint-based background check.

Notice
Fieldprint is required to provide demographic values established by the FBI and/or state and federal agencies.

*** — Required Fields**

Citizenship*

Place of Birth*

City of Birth*

Gender*

Height* ft in

Weight* lb

Eye Color*

Hair Color*

Race*

Authorizations

You will next review the **Biometric Disclosure**. Click **I agree** and enter your full name to consent, and click **Continue** to move forward.

Biometric Disclosure

State Required Biometric Information Disclosure and Authorization
Please be advised that your fingerprints will be collected, stored, and used in connection with your contract and/or employment with organization requesting your fingerprints ("ORGANIZATION"). Such collection, storage, and use of your fingerprints may occur at any time after the company receives your written authorization, including during the hiring process, as well as during the course of your contract and/or employment with ORGANIZATION or for volunteering/licensing, as the case may be, where permitted by law ("Stated Purposes").

Your fingerprints are being collected and used in order to obtain Criminal History Record Information (CHRI) from state governments and/or agencies in connection with your contract and/or employment or volunteering with ORGANIZATION, or for licensing, as the case may be.

Your fingerprints and any information obtained using your fingerprints will be retained and stored by Fieldprint, Inc. and will be permanently destroyed minimally after three (3) years of your last interaction with Fieldprint, Inc. In some instances, we may retain your fingerprints for less than three (3) years or indefinitely, based on the requirements of our clients, which may be regulatory or otherwise. For the exact retention period for your particular purpose, please contact us at (888) 472-8918. You may view Fieldprint, Inc.'s Privacy Policy, on the retention and destruction of biometric information <https://www.fieldprint.com/privacy-policy/>.

Authorization to Obtain and Disclose Biometric Information
By signing below, I hereby authorize Fieldprint, Inc. to collect, store, and use my fingerprints, and further authorize Fieldprint, Inc. to disclose and use my fingerprints to obtain criminal background information in connection with my Stated Purposes.
By signing below, I further authorize Fieldprint, Inc. to share my fingerprint information, criminal results, and any other information obtained using my fingerprints with ORGANIZATION for the Stated Purposes.
By signing below, I acknowledge and agree that this authorization to obtain and disclose my biometric information, criminal results, and any other information obtained using my fingerprints, is valid now as well throughout the course of my contract, employment, volunteering, and/or licensing, as may be applicable, with ORGANIZATION, where permitted by law.

TO USE THIS SERVICE, YOU CERTIFY UNDER PENALTY OF LAW, THAT YOU ARE THE SAME PERSON WHO IS BEING FINGERPRINTED, WHO IS REVIEWING ALL OF THE APPLICABLE NOTICES AND COMPLETING THE APPLICABLE FORMS. IT IS STRICTLY PROHIBITED FOR ANYONE ELSE TO PROCEED FURTHER EXCEPT THE PERSON WHO IS BEING FINGERPRINTED, UNLESS YOU HAVE WRITTEN APPROVAL FOR SPECIAL CIRCUMSTANCES, SUCH AS A DISABILITY, FROM FIELDPRINT, INC. OR THE REQUESTING ORGANIZATION/AGENCY.

I agree*

Your Full Name

Today's date

You will next review the **GA Privacy Statements**. Click the box next to “I acknowledge that I have read, understand, and agree to the above statements.”

Data Collection

✓ Personal Information

✓ Demographics

Authorization

✓ Biometric Disclosure

GA Privacy Statements

Send Request to Review

Schedule Appointment

Payment

Confirmation

GA Privacy Statements

To download this document click: [GBI Documents](#)

NON-CRIMINAL JUSTICE APPLICANT'S PRIVACY RIGHTS

As an applicant who is the subject of a Georgia only or a Georgia and Federal Bureau of Investigation (FBI) national fingerprint/biometric-based criminal history check for a noncriminal justice purpose (such as an application for employment or a license, an immigration or naturalization matter, security clearance, or adoption), you have certain rights which are discussed below. All notices must be provided to you in writing. These obligations are pursuant to the Privacy Act of 1974, Title 5, United States Code (U.S.C.) Section 552a, and Title 28 Code of Federal Regulation (CFR), 50.12, among other authorities.

- You must be provided written notification that your fingerprints/biometrics will be used to check the criminal history records maintained by the Georgia Crime Information Center (GCIC) and the FBI, when a federal record check is so authorized.
- You must be provided an adequate written FBI Privacy Act Statement (dated 2013 or later) when you submit your fingerprints and associated personal information. This Privacy Act Statement must explain the authority for collecting your fingerprints and associated information and whether your fingerprints and associated information will be searched, shared or explained.
- You must be advised in writing of the procedures for obtaining a change, correction, or update of your criminal history record as set forth at 28 CFR 16.34.
- You must be provided the opportunity to complete or challenge the accuracy of the information in your criminal history record (if you have such a record).
- 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 officials deny you the employment, license, or other benefit based on the information in the criminal history record.
- If agency policy permits, the officials 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, you may find information regarding how to obtain a copy of your Georgia criminal history record at the GBI website: <https://ga.gov/ga.gov/services/obtain-criminal-history-record-information-frequently-asked-questions>

Information regarding how to obtain a copy of your FBI criminal history record is located at the FBI website: <https://www.fbi.gov>

- If you decide to challenge the accuracy or completeness of your criminal history record, you should contact and send your challenge to the agency that contributed the questioned information. If the disputed arrest occurred in the State of Georgia, you may send your challenge directly to the GCIC. Contact information for the GCIC can be found at: <https://ga.gov/ga.gov/services/obtain-criminal-history-record-information-frequently-asked-questions>. Alternatively, you may send your challenge directly to the FBI by submitting a request via <https://www.fbi.gov>. The FBI will then forward your challenge to the agency that contributed the questioned information and request the agency to verify or correct the challenge entry. Upon receipt of an official communication from that agency, the FBI will make any necessary changes/corrections to your record in accordance with the information supplied by that agency. (See 28 CFR 16.30 through 16.34.)
- You have the right to expect that officials receiving the results of the criminal history record check will use it only for the authorized purposes and will not retain or disseminate it in violation of federal statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.

Privacy Act Statement

This privacy act statement is located on the back of the FD-256 fingerprint card.

Authority: The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal regulations. Providing your fingerprints and associated information is voluntary, however, failure to do so may affect completion or approval of your application.

Principal Purpose: Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

Routine Uses: During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent, and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Biometric Routine Uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting, licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

As of 02/04/2021

To download this document click: [GBI Documents](#)

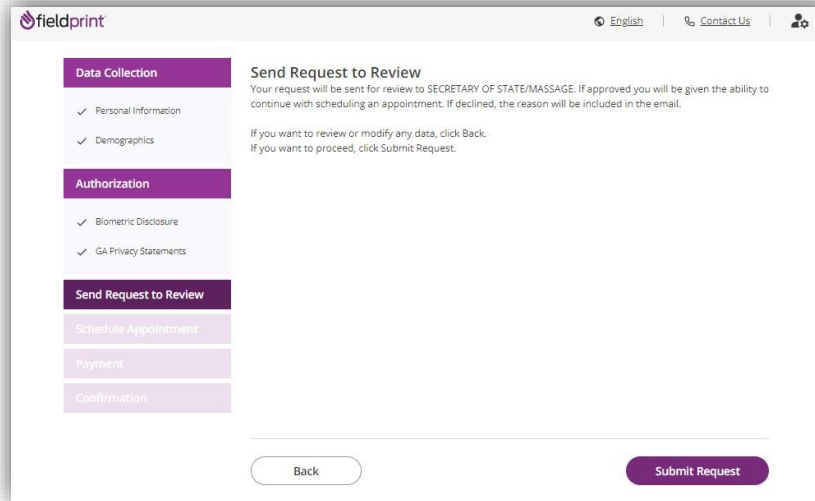
TO USE THIS SERVICE, YOU CERTIFY UNDER PENALTY OF LAW THAT YOU ARE THE SAME PERSON WHO IS BEING FINGERPRINTED, WHO IS REVIEWING ALL OF THE APPLICABLE NOTICES AND COMPLETING THE APPLICABLE FORMS. IT IS STRICTLY PROHIBITED FOR ANYONE ELSE TO PROCEED FURTHER EXCEPT THE PERSON WHO IS BEING FINGERPRINTED, UNLESS YOU HAVE WRITTEN APPROVAL FOR SPECIAL CIRCUMSTANCES, SUCH AS A DISABILITY FROM FIELDPRINT, INC. OR THE REQUESTING ORGANIZATION/AGENCY.

I acknowledge that I have read, understand, and agree to the above Statement.*

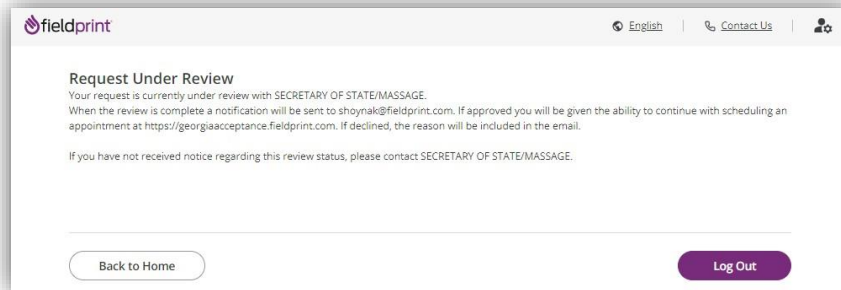
Back
Continue

Send Request to Review

If you selected a Reason that requires Agency Approval, you will see the **Send Request to Review** page. Clicking **Submit Request** will submit your request for review by the Georgia organization or agency listed. Otherwise, you will proceed directly to the **Schedule Appointment** page.



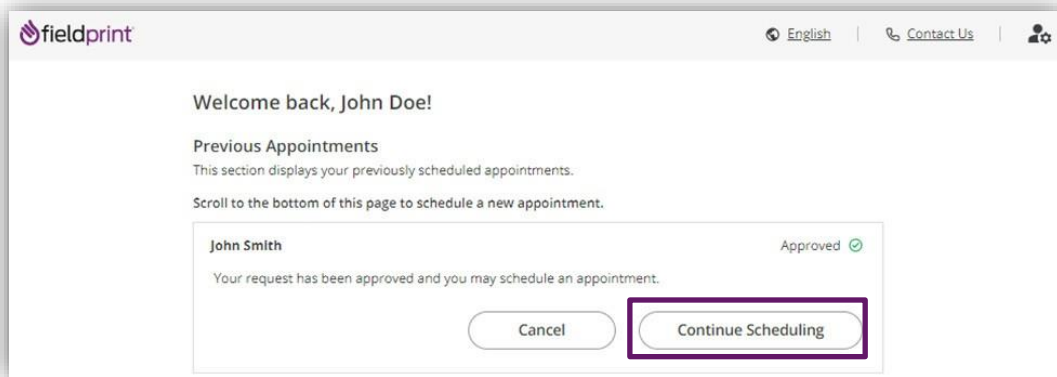
Submitting the request will put the request under review.



You will be notified once the organization or agency has reviewed and approved your request.

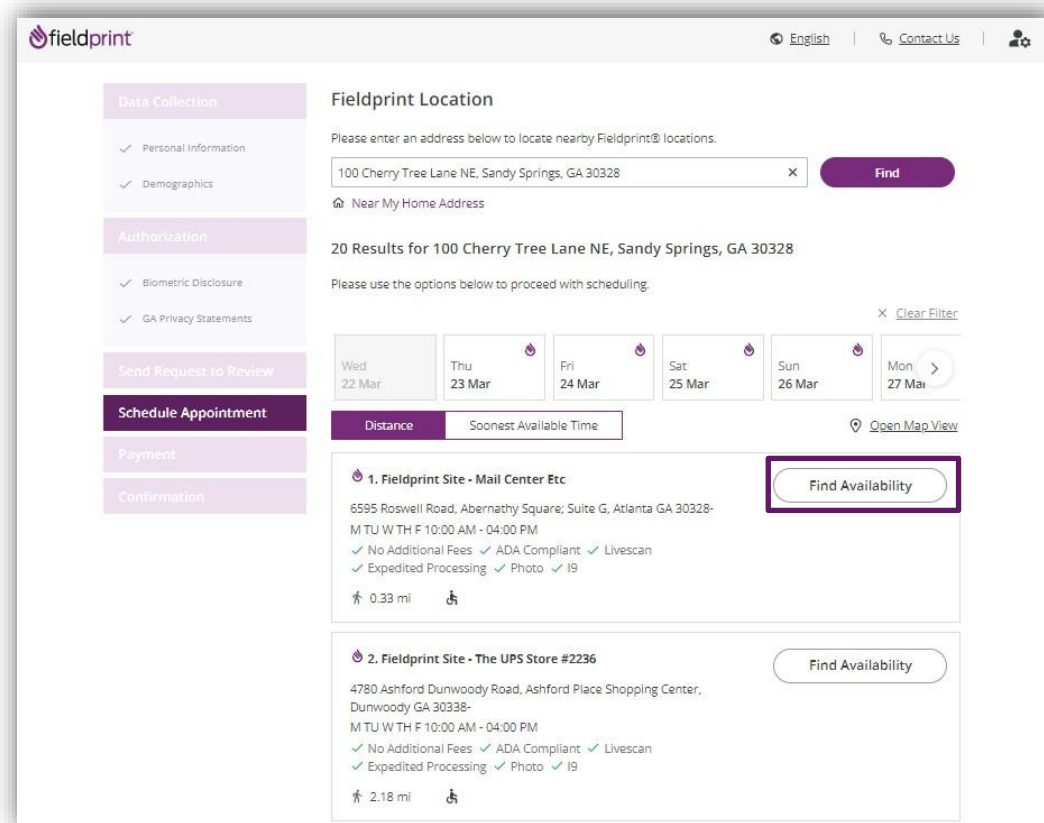


When you log back in, the system will prompt you to **Continue Scheduling**.



Schedule Appointment

Next you will select a location, date, and time for your Livescan fingerprint capture. The system will default to the home address entered, but you are able to change to another address that may be more convenient. Sites can be sorted by distance or soonest available time. Each entry will provide the address, hours of operation, and other key information about the site. Once you choose a site, click **Find Availability**.



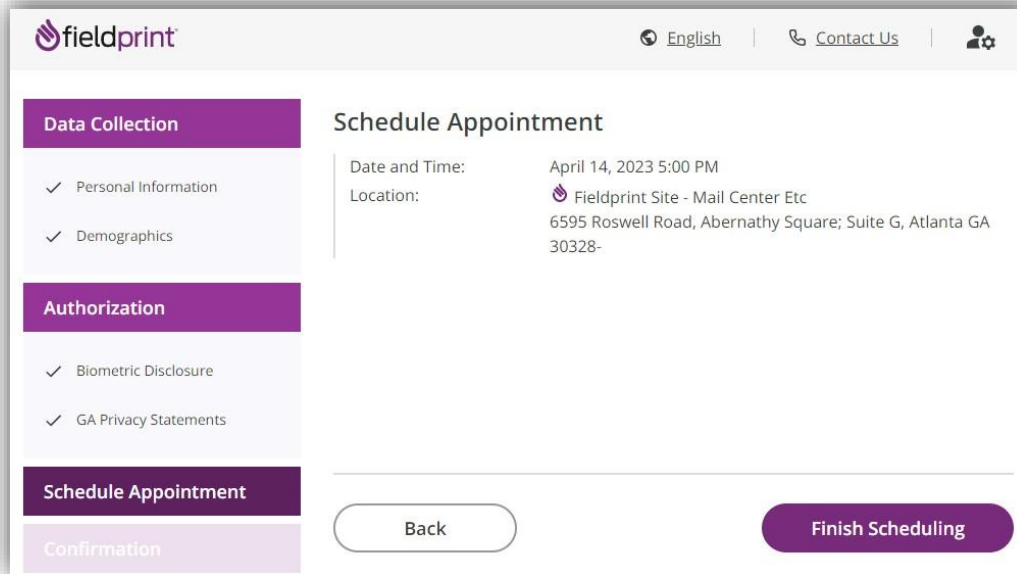
Using the dropdowns you will select the date and time for your appointment and click **Continue**.

Payment

If you are required to pay for the fingerprint appointment, you will select your method of payment – either PayPal or debit / credit card. Cards accepted include MasterCard, Visa, American Express, and Discover.

Fee Type	Fee
Background Check Fee	\$ 51.50
Your Total to Pay:	\$ 51.50

If the agency is paying, you will click the **Finish Scheduling** button without seeing the Payment page.

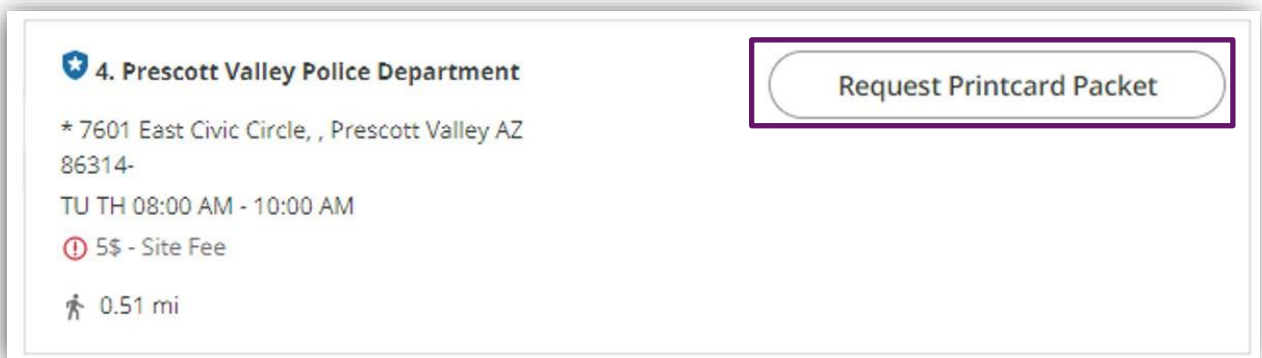


Request Printcard Packet (If Applicable)

If a Livescan location is unavailable within the contracted range, the system will offer you the ability to request an ink card packet. This will also be the method used if you are located out of state. Clicking **Request Printcard Packet** will trigger a request to Fieldprint for a packet containing two barcoded fingerprint cards, instructions, and a return envelope to be mailed to your address.

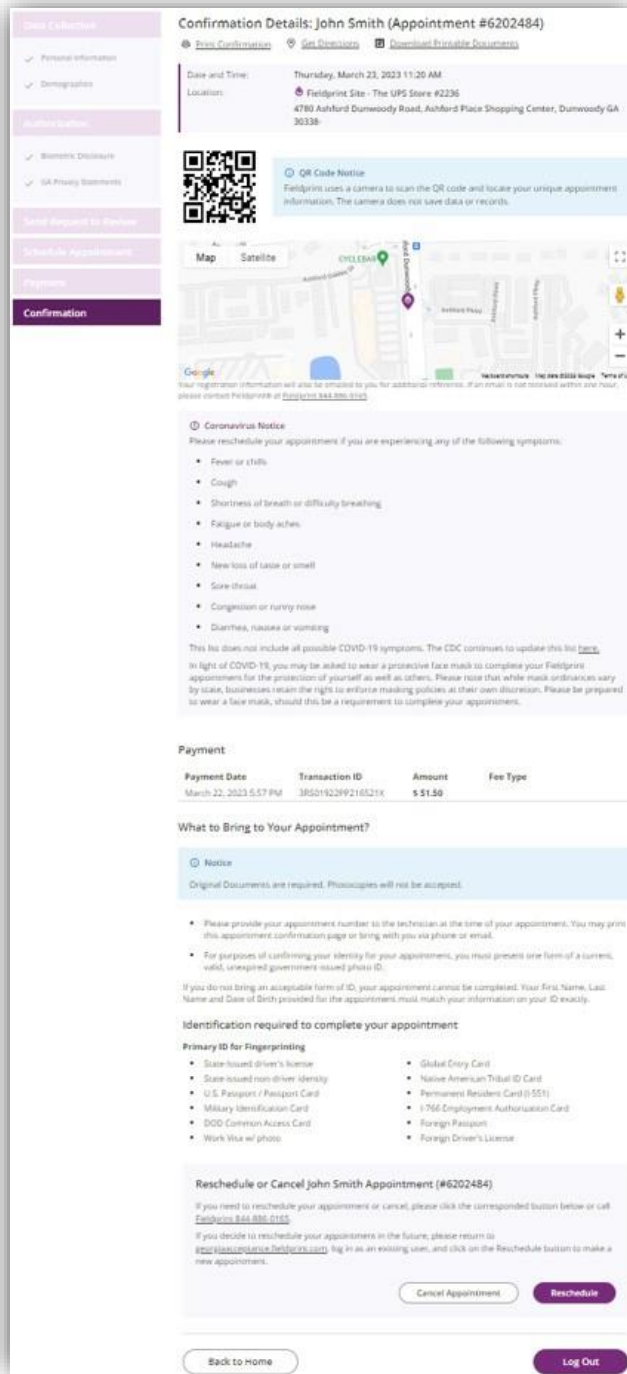
Completed packets should be returned to:

Fieldprint, Inc.
PO Box 407
Marlton, NJ 08053



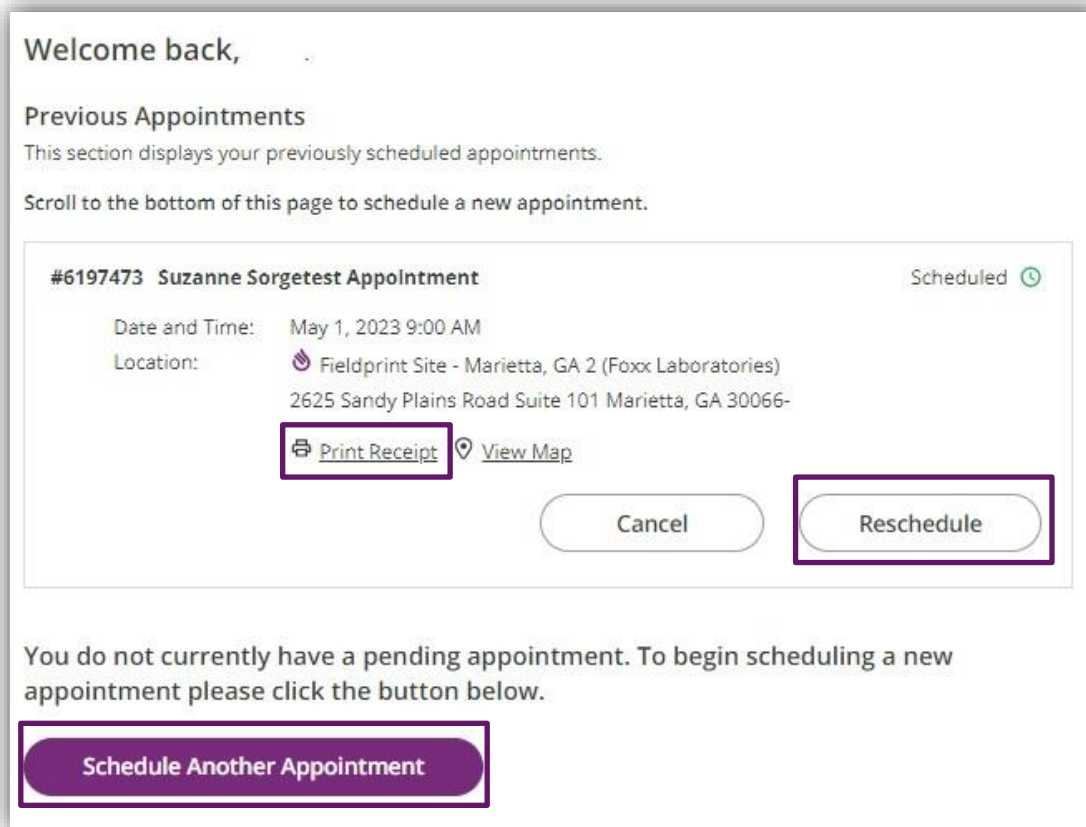
Confirmation

After scheduling your appointment, you will receive a confirmation screen. The confirmation page will show your appointment number, location, date and time. There is important information noted on the confirmation page, displaying identification required for the appointment. **Be sure to bring the appropriate identification to your appointment.**



Appointment Management

Logging back in as a returning user will allow you to manage your appointment or create another. Click **Reschedule** to change the appointment location, date, or time. Clicking **Schedule Another Appointment** will take you to complete a new registration.



The screenshot shows a user interface for managing appointments. At the top, it says "Welcome back," followed by a "Previous Appointments" section. Below this, there is a list of appointments. The first appointment is titled "#6197473 Suzanne Sorgetest Appointment" and is marked as "Scheduled" with a clock icon. The details for this appointment are: "Date and Time: May 1, 2023 9:00 AM" and "Location: Fieldprint Site - Marietta, GA 2 (Foxyx Laboratories) 2625 Sandy Plains Road Suite 101 Marietta, GA 30066-". Below the location, there are two links: "Print Receipt" and "View Map". At the bottom of the appointment card, there are two buttons: "Cancel" and "Reschedule". Below the appointment card, there is a message: "You do not currently have a pending appointment. To begin scheduling a new appointment please click the button below." and a large purple button labeled "Schedule Another Appointment".

You will also have the ability to **Print Receipt** which contains appointment information, what to bring, and contact information to reschedule.


Receipt

You will find all needed information about your appointment here.

John Smith Appointment Details (#6203991)

[Print Receipt](#)
[Get Directions](#)
[Download Printable Documents](#)


Date and Time: Friday, April 14, 2023 5:00 PM
Location: Fieldprint Site - Mall Center Etc
 6595 Roswell Road Abernathy Square, Suite G Atlanta GA 30328-



QR Code Notice

Fieldprint uses a camera to scan the QR code and locate your unique appointment information. The camera does not save data or records.

Map Satellite



Coronavirus Notice

Please reschedule your appointment if you are experiencing any of the following symptoms:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose

This list does not include all possible COVID-19 symptoms. The CDC continues to update this list [here](#). In light of COVID-19, you may be asked to wear a protective face mask to complete your Fieldprint appointment for the protection of yourself as well as others. Please note that while mask ordinances vary by state, businesses retain the right to enforce masking policies at their own discretion. Please be prepared to wear a face mask, should this be a requirement to complete your appointment.

What to Bring to Your Appointment?

Notice

Original Documents are required. Photocopies will not be accepted.

- Please provide your appointment number to the technician at the time of your appointment. You may print this appointment confirmation page or bring with you via phone or email.
- For purposes of confirming your identity for your appointment, you must present one form of a current, valid, unexpired government-issued photo ID.

If you do not bring an acceptable form of ID, your appointment cannot be completed. Your First Name, Last Name and Date of Birth provided for the appointment must match your information on your ID exactly.

Identification required to complete your appointment

Primary ID for Fingerprinting

<ul style="list-style-type: none"> • State-issued driver's license • State-issued non-driver identity • U.S. Passport / Passport Card • Military Identification Card • DOD Common Access Card • Work Visa w/ photo 	<ul style="list-style-type: none"> • Global Entry Card • Native American Tribal ID Card • Permanent Resident Card (I-551) • I-766 Employment Authorization Card • Foreign Passport • Foreign Driver's License
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Reschedule or Cancel John Smith Appointment (#6203991)

If you need to reschedule your appointment or cancel, please click the corresponded button below or call Fieldprint 844-886-0165.

If you decide to reschedule your appointment in the future, please return to georgiaacceptance.fieldprint.com, log in as an existing user, and click on the Reschedule button to make a new appointment.

International Applicants

If you are an **international applicant**, you will not be able to use the Fieldprint Scheduling Website. Instead, you will use the following International Applicants process explained below:

1. The Georgia agency will provide you with the Originating Agency Identifier (ORI) and Reason for Fingerprinting (RFP) and then direct you to call Fieldprint at **844-886-0165**.
2. A Fieldprint representative will send you an email with the Georgia Privacy Statements waiver.
3. Once you return the waiver, the Fieldprint representative will create order in Hank (Fieldprint's fingerprint processing system).
4. While you are on the phone, Fieldprint will create an order based on the ORI/RFP provided and capture your Personal and Demographic information.
5. You will provide Fieldprint with payment.
6. Fieldprint will mail you a Printcard packet. The packet will contain two barcoded fingerprint cards, instructions and a return envelope. This packet will be mailed to the address you provide.
7. You will need to be fingerprinted on the cards and mail them back to Fieldprint.
8. Fieldprint will then scans the print cards into system and electronically submits them to GBI-AFIS.