



ARCHDIOCESE OF LOS ANGELES  
Fingerprinting Department  
3424 Wilshire Boulevard, Los Angeles CA 90010-2241

Date Requested: \_\_\_\_\_

## REQUEST FOR VPIN ACCESS

In order to have a VPIN account created or updated, this form must be completed and signed by the Pastor, Principal, or (for locations other than parishes and schools) Director. Please scan completed and signed form to PDF and e-mail to [fingerprinting@la-archdiocese.org](mailto:fingerprinting@la-archdiocese.org). If you have any questions, please contact Joel Avenido at (213) 637-7308 or by e-mail at [javenido@la-archdiocese.org](mailto:javenido@la-archdiocese.org).

### VPIN User Details:

New User       Update User       Delete or Suspend User

Full Name: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Position: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_ Hours to Call: \_\_\_\_\_

Location Name: \_\_\_\_\_

Depart ID/Cost Center/School Code: \_\_\_\_\_ City: \_\_\_\_\_

Please indicate what level of access this user should have:

- Site Administrator - Able to process/add screenings (Includes Data Entry)
- Viewer - Able to search and display information for this location and the people assigned to it

Do you need VPIN training? Yes -  No -

Other/Additional Requests - Please specify:

Pastor/Principal/Director printed name:

Pastor/Principal/Director signature:

\_\_\_\_\_

\_\_\_\_\_

Pastor/Principal/Director (E-mail address to send confirmation):

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