



**Technician Application**  
 Alarm, Locksmith, and Fire Sprinkler Program  
[www.ok.gov/odol](http://www.ok.gov/odol)

**OKLAHOMA DEPARTMENT OF LABOR**  
 3017 N. Stiles, Suite 100  
 Oklahoma City, OK 73105  
 405-521-6100/888-269-5353  
 M-F 8:00am-4:30pm

<b>APPLICATION TYPE</b> <input type="checkbox"/> New	<b>APPLICATION FEE</b> \$49.00	<b>EXACT AMOUNT IS RECOMMENDED</b> <b>FEE IS NON-REFUNDABLE</b>
If Application process is not completed within 120 days of submission, a new application (and fee) will need to be filed.		

<b>REQUIRED DOCUMENTATION FOR NEW APPLICANTS:</b>	<b>NON-U.S. CITIZENS:</b>
<b>U.S. CITIZENS:</b>	
<ul style="list-style-type: none"> <li>• Certificate of Completion from an Approved Examination Entity**</li> <li>• Affidavit of Lawful Presence, signed</li> <li>• A valid, unexpired Driver's License <u>OR</u> State Issued Photo-Identification Card <u>OR</u> Military ID <u>AND</u></li> <li>• Birth Certificate <u>OR</u> Social Security Card <u>OR</u> A valid, unexpired passport <u>OR</u> A W-2 form/1099 form from current employer</li> <li>• Two completed (2) fingerprint cards</li> </ul>	<ul style="list-style-type: none"> <li>• Verification of Immigration Status</li> <li>• Certificate of Completion from an Approved Examination Entity**</li> <li>• Affidavit of Lawful Presence, signed</li> <li>• A valid, unexpired Driver's License <u>OR</u> State Issued Photo-Identification Card <u>OR</u> Military ID <u>AND</u></li> <li>• Birth Certificate <u>OR</u> Social Security Card <u>OR</u> A valid, unexpired passport <u>OR</u> A W-2 form/1099 form from current employer</li> <li>• Two completed (2) fingerprint cards</li> </ul>

All new applicants must appear **IN PERSON** at the Oklahoma Department of Labor or ODOL approved facility  
 \*\* Certificate of Completion from an Approved Examination Entity is NOT required if the only category is CCTV-Residential Stand-Alone

<b>Category:</b>	Access Control	Locksmith	Commercial Fire Alarm	Closed Circuit Television-Res Stand Alone
	Fire Sprinkler	Nurse Call	Burglar/Residential Fire Alarm	Closed Circuit Television

Name:	Applicant Hire Date:
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Mailing Address:	City:	State:	Zip Code:
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Social Security #:	Date of Birth:
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Phone: (    )	E-mail Address (REQUIRED):
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Company Name & License #:	Company Manager & License #:
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<div style="display: flex; justify-content: space-between;"> <span>Signature of Manager</span> <span>Date</span> </div>	<b>License will NOT be issued without proof of employment from Licensed Company once exams are passed</b>
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**MILITARY STATUS**  
 Within the past six (6) months, have you been honorably discharged from the Armed Forces of the United States, coming off Active Duty as a member of the National Guard or Reserves, or transferred from another state to Oklahoma?  Yes  No  
 If yes, provide date of discharge/coming off Active Duty/transfer: \_\_\_\_\_  
 Are you a spouse of an active duty member of the Armed Forces of the United States?  Yes  No

I certify the information given on this application by me is true and accurate to the best of my knowledge. I understand that false information could result in revocation of my license.

**Signature of Applicant / APPLICATION CANNOT BE PROCESSED WITHOUT A SIGNATURE AND FEE** **DATE**

Be aware by completing this application you are submitting to a national Federal Bureau of Investigation background check. Your criminal history record search obtained pursuant to U.S. Department of Justice Order 556-73 may not meet employment requirements. Should this be the case, you will have the opportunity to appeal to the Alarm/Locksmith Advisory Board. If you would like additional information regarding your background check, please refer to the Federal Bureau of Investigation website at [www.FBI.gov](http://www.FBI.gov).

The Department of Labor will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability or political beliefs. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.	Date:	Lic #:	Receipt #:
	Initials:	Payment Type:	Amount:

## Privacy Act Statement and Applicant Notification

**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 Public Law 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 other 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 Blanket 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.

### Applicant Record Challenge

**Applicant Record Challenge:** Before a final decision is made, you have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification record is set forth in Title 28, CFR 16.34. For information on updating the national criminal history record, visit [www.FBI.gov](http://www.FBI.gov) or <https://www.fbi.gov/cjis/identity-history-summary-checks#challenge-of-an-identity-history-summary>. If certified documents are obtained for the purpose of updating your criminal history record, the documents should be forwarded to the FBI and to the repository in the state where the arrest occurred