



**WASHINGTON STATE**  
COLLEGE OF OHIO

**FBI and BCI Background Check via Electronic Fingerprinting**

**Local locations for fingerprinting:**

<https://www.ohioattorneygeneral.gov/Business/Services-for-Business/WebCheck/Webcheck-Community-Listing>

**You will need to provide:**

1.	Photo ID:	
2.	Name:	
3.	Date of Birth:	
4.	SSN #:	
5.	Address:	
6.	State:	
7.	Zip Code:	
8.	Phone Number:	
9.	Email Address:	
10.	Sex:	
11.	Race:	
12.	Height:	
13.	Weight:	
14.	Hair Color:	
15.	Eye Color:	

**Reason for background check:**

Respiratory clinical rotations, respiratory licensure, and employment. **Code: 4761 051**

**Address for results to be mailed to (absolutely necessary):**

WSCO  
Attn: Adrienne Hellinger  
710 Colegate Drive  
Marietta, OH 45750

**Direct Copy Options (also absolutely necessary):**

Ohio Medical Board – Respiratory Care Professional