

Nevada Division of Public and Behavioral Health

Dietitian/Music Therapy Licensing Unit  
727 Fairview Drive, Suite E  
Carson City, NV 89701

## **Music Therapy Background Investigation Instructions**

*(please read these instructions carefully and follow all of the listed steps)*

1. All applicants must complete one fingerprint card by going to a law enforcement agency or by a private fingerprinting service. Manual prints may be completed by a law enforcement agency in any state. Fingerprints submitted electronically are only available if you are physically in Nevada. For a list of Nevada fingerprint locations visit the Nevada Department of Public Safety's website at: <http://rccd.nv.gov/FeesForms/Fingerprints/>

**Note:** You are strongly encouraged to have your fingerprints submitted via electronic transmission (LiveScan), but this is only available if you are physically in Nevada.

2. Complete these information blocks on both cards, and make sure they are legible: **last, first, and middle names; signatures of applicant and official; residence** (complete address); **date of birth; place of birth; sex; race; height; weight; eyes and hair.**

**IMPORTANT** – In addition to the above information **make sure the following information is included on the fingerprint cards in the sections noted below** (Failure to do so may result in additional processing charges):

6. REASON FINGERPRINTED: **NRS 640D.110**
5. MISCELLANEOUS NO. (MNU): **150828**
7. ORI: **NV0131700**

**Please ensure the fingerprint card used is an Applicant, FD-258 card:**

Cards without these information blocks completed are considered “incomplete” and will be returned to the applicant. Illegible cards will not be processed.

3. **Be sure:** • You have your prints captured at an in-state (NV) LiveScan location (recommended); **OR**  One fingerprint card is completed and the card is not folded, torn or damaged in any way.  Information blocks are complete and legible; the card is signed by the appropriate persons (applicant and official).
4. **Submit to the Department of Public Safety:**  
**If you completed one fingerprint card** (not via electronic transmission):
  - Payment of \$36.25 made payable to the Department of Public Safety
  - Your completed fingerprint card (FD-258)

You may pay by a business check, cashier's check, or money order, payable to the Department of Public Safety, U.S. Funds only. **NOTE: *Personal Checks will NOT be accepted.* You may be charged a separate fee in addition to the \$36.25 payment when you get your fingerprints rolled.**

Mail the required items to the following address:

Division of Public and Behavioral Health  
Dietitian/Music Therapist Licensing Unit  
727 Fairview Drive, Ste. E  
Carson City, Nevada 89701

**5. If you complete your fingerprints via electronic transmission follow the instructions below:**

6. Go to a Department of Public Safety approved Livescan Fingerprinting Site which can be found at: <http://rccd.nv.gov/FeesForms/Fingerprints/>
7. Look for an approved non-law enforcement site which will collect a scanning fee and the \$36.25 fingerprint processing fee. **If you go to a site that does not collect the processing fee your fingerprints will be rejected.**

**Note:** If you plan on submitting your prints electronically **DO NOT** use a law enforcement agency.

**8. Please follow the instructions below depending on how you submit your application.**

**9. FOR ONLINE APPLICATIONS ONLY**

Log back into the licensing system and upload into the system proof that your fingerprints have been completed, such as receipts and/or proof of electronic submission. If you are unable to upload the proof into the system you can fax it to: 775-684-1073, email it to: [individuallicensing@health.nv.gov](mailto:individuallicensing@health.nv.gov) or mail it to: Division of Public and Behavioral, Dietitian/Music Therapist Licensing Unit, 727 Fairview Drive, Suite E, Carson City, NV 89701

**10. FOR MANUAL APPLICATIONS ONLY-by prior approval only**  
(applications that are mailed into our office)

Submit to the Division of Public and Behavioral Health **with your licensure application**, regardless of how you were fingerprinted (manually or electronic):

- The Civil Applicant Waiver form
- Proof that your fingerprints have been completed, such as receipts and/or proof of electronic submission
- Follow instructions on the licensure application form