Section One: Agency Information

AGENCY 4-DIGIT MACHS REGISTRATION NUMBER:  6571

Agency Name: Southeast Missouri State University

Agency OCA: V01600011

Section Two: The Missouri Automated Criminal History Site (MACHS)

For fingerprinting services through the state electronic fingerprint vendor, you must first register with the Missouri Automated Criminal History Site (MACHS). If you do not have internet access, you may contact 3M Cogent directly at 1-877-862-2425 to have a Fingerprint Services Representative conduct the registration on your behalf.

MACHS Registration Instructions:

1. Log-on to www.machs.mo.gov
2. Click on the “blue box” MACHS Fingerprint Search Portal
3. Click on the “blue box” to Register with MACHS
4. In the yellow-highlighted box, enter your agency 4-Digit Registration Number and hit "enter"
5. Enter your personal information.
6. At the Missouri Background Check Fingerprint Summary verify all personal data and agency information before proceeding. If all information entered is accurate and complete, click Complete Registration. This will take you to the fingerprint services vendor for further processing to include payment and to select a fingerprint location. Please note your Transaction Control Number (TCN). The TCN will be required at the time of fingerprinting to confirm your MACHS registration data.

Your processing fee is automatically calculated based on the 4-digit registration number that you provide. Fees are either paid at the time of registration or are payable to 3M Cogent at the time of fingerprinting unless a billing account has been established by your agency. Upon completion of the fingerprint appointment, 3M Cogent will transmit your fingerprint background check request to the Missouri State Highway Patrol (MSHP) for processing through the state and FBI. The results of the search will be provided to the authorized agency within 5 to 10 business days.

Section Three: Registration Confirmation (for applicant or agency use)

Applicant Name:________________________________________________________

TCN (Confirmation Number)______________________________________________

Date Prints Taken_______________________________________________________