

## Welcome to Complio Screening!

Complio is an online screening system selected by your school to hold background check details. Follow these step-by-step instructions to create an account and place your order.

**Step 1:** Create an account by going to <http://www.LSCCompliance.com>. Navigate to the Complio homepage by clicking on **Create an Account** to get started. Enter your personal information. Be extra careful entering your Email Address, as this is the system's main mode of communication with you.

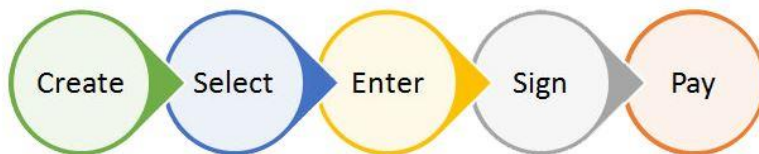
Applicant Background Screenings  
Powered By American DataBank   
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### Welcome to Lake Superior College's Complio Website

Complio is American DataBank's comprehensive tool for student screening, immunizations and compliance. The Complio Screening process is simple and straightforward with just five basic steps to complete. The process should take less than 20 minutes.

**EXISTING USERS**  
Click Here to Login

**NEW USERS**  
Create An Account



**complio**  
by American DataBank



### Create an account

Please fill the form below to create an account. The items with \* text are required.

#### Account Information

Username:\*    
Password:\*  Confirm Password:\*

#### Personal Information

I don't have Middle Name.  
First Name:\*  Middle Name:\*  Last Name:\*   
 I have an Alias/Maiden  
Gender:\*  Date of Birth:\*  Social Security Number:\*    
Select Profile Picture:

#### Contact Information

Primary Email:\*  Confirm Primary Email:\*   
Secondary Email:  Confirm Secondary Email:   
Address 1:\*  Address 2:   
Country:\*  State:\*  City:\*   
Zip Code:\*  County:\*   
Primary Phone:\*  Secondary Phone:

Please enter the Verification Code as shown in the image on the right:



**Step 2:** Complio will send an email to the address used during account creation. Click on the **Activation Link** within the message or copy and paste the URL in your web browser.

## Place your Order

**Step 3:** Please note: An Account is not the same as a placing an order. Click **Get Started** to begin placing your order. Select your school and program of study and click Load Packages. Select the appropriate package. Please contact your Lake Superior College Administrator if you have questions regarding which package to order.

Please contact your institution if you are unsure what package(s) you need to order.

**Identifying Information**

Institution Name:	Lake Superior College		
Select School: *	Allied Health and Nursing	Select Program:*	Nursing

Load Packages

**Screening**

Criminal Background Check (\$65.00) This package costs \$65.00 and additional fees may apply. [View Package Details](#)

Estimated Screening Total: \$ 65.00

**Estimated Order Total**

Estimated Order Total: \$ 65.00

Previous Next

**Step 4:** Other names – Provide any alias/maiden names that you have used and enter previous addresses if applicable. Click Next to proceed once all your information has been entered.

**Personal Information**

I don't have Middle Name.

First Name: \*  Middle Name: \*

I have an Alias/Maiden

I don't have Alias/Maiden Middle Name.

Alias/Maiden First Name:  Alias/Maiden Middle Name:

Gender: \*  Date of Birth: \*

Phone: \*  Secondary Phone:

Email:  Secondary Email:

You can edit your email address by clicking Edit Profile on your dashboard.

**Text Message Notifications**

Receive Text Notification:  Yes  No

**Residential History**

I have lived in additional locations during the last 7 year(s).

Move in Date	F
No records to display.	

## Electronic Signature

**Step 5:** Please read the Disclosure and Authorization on the next screen, sign, and click **Accept & Proceed** to continue. The page will show your signature in the form after you have signed. Click **Next** to proceed.



Rev. 4.9

### Disclosure and Authorization Form

PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION

As part of the application process for enrollment and/or acceptance at **Your University** (“the School”), the School and/or its agents may obtain information about you from a consumer reporting agency. Thus, you may be the subject of a “consumer report” and/or an “investigative consumer report” which may include, but is not limited to information about your character, general reputation, personal characteristics and/or mode of living, employment history, work experience, work performance, criminal history records, sexual offender’s lists, motor vehicle records, military records, educational verification, license verification, credit history, government exclusion lists, OIG, GSA, FBI finger printing, and drug testing or other background checks. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. You also may request a written summary of Your Rights Under the Fair Credit Reporting Act, a copy of which is attached to this form. The scope of this notice and authorization is all-encompassing, however, allowing the School to obtain from any individual or entity all manner of consumer reports and investigative consumer reports now and throughout the course of your enrollment to the extent permitted by law.

I hereby authorize and give my written instructions for the obtaining of “consumer reports” and/or “investigative consumer reports”, by the School and/or any health care facilities where I may be placed, at any time after receipt of this authorization and throughout my enrollment, if applicable. To this end, I hereby authorize, without reservation, any individual or entity to furnish any and all background information requested by **American DataBank, 110 Sixteenth St., 8th Fl., Denver, CO 80202, 1-800-200-0853**, or another outside organization acting on behalf of the School and/or a health care facility where I may be placed. I also certify that all information provided on my application, including this form, is correct to the best of my knowledge. Any false statements provided will be considered just cause for denial of participation and/or acceptance.

Upon request, American DataBank will supply a copy of my report and my rights under the Fair Credit Reporting Act. Requests may

I have read and agree to the above Disclosure & Authorization form(s)

Sign Here

Clear Signature



Video Tutorial

Cancel Order

Previous

Next

## Review and Confirmation

**Step 6:** Carefully review the information you have provided, once the order has been placed you cannot change any information. If you need to adjust the Package or your personal information, click on the buttons on the right-hand side of the screen. **If any information is incorrect you will be required to re-order at your own expense.**

The screenshot shows a user interface for reviewing and confirming information. At the top right, there is a button labeled "Change Package Selection". Below this, there is a button labeled "Edit Profile". The main content area contains a form with the following fields and values:

Last Name:	Test
Social Security Number:	111-11-1111
Country:	UNITED STATES
Zip:	80202

**Step 7:** Confirmation and Receipt – Once you have confirmed that your information is correct proceed to the next screen. You will see Invoice to Institution as the Payment Type. Click Next to Proceed. You will receive a receipt via email. Your school will be notified when your report is complete.

**Questions?** American DataBank is available to assist you Monday-Friday 7am-6pm MST or you can contact us by email [complio@americandatabank.com](mailto:complio@americandatabank.com) or by calling 1-800-200-0853.