

DEPARTMENT OF HOMELAND SECURITY
FEDERAL LAW ENFORCEMENT TRAINING CENTERS
VISITOR ACCESS REQUEST

Privacy Act Statement:

Authority: 5 U.S.C. 301; the Homeland Security Act, codified in Title 6 of the U.S. Code; 44 U.S.C. 3101; and Executive Order (EO) 9397; EO 12968; and Federal Property Regulations, issued July 2002.

Purpose: The purpose for collecting and maintaining this information is to allow individuals access associated with DHS/FLETC facilities and perimeter access control, as well as visitor security and management.

Routine Uses: System of Records Notice (SORN) DHS/ALL-024 located at <https://www.govinfo.gov/content/pkg/FR-2010-02-03/html/2010-2206.htm>.

Disclosure: Disclosure of this information is voluntary. Failure to provide requested information may result in denial of access to the FLETC property.

SECTION A - To be completed by Applicant

1. Applicants Full Name: (Last, First, Middle)

Aliases Used (nicknames, maiden names, etc):

2. Residential Address: Street Address:
City, State, Zip code:

3. Driver's License: State Driver's License #:

4. Country of Citizenship (List all that apply *):
(* If not a U.S. Citizen, you must complete the DHS Form 11055)

5. Place of Birth (City and State):

6. Gender: Male Female

7. Date of Birth: 8. Social Security #:

9. Contact Information: Home or cell phone number: E-mail:

10. Date Completed:

SECTION B - To be Completed by Sponsor (Must be a Federal Employee)

1. Sponsor Name: Agency:
E-mail Address: Office/Cell Number:

2. Type of access requested for Applicant: Graduation Guest Frequent Vendor One Time Vendor Frequent Visitor
 5 Day or Less Visitor 5 Day or Less Contractor

3. Class Number (if a Graduation Guest):

4. Relationship to Applicant (if a Visitor):

5. Company Name (if a Vendor or a 5 Day or Less CTR):

6. Requested Access Dates: Start Date: Work End Date:

SECTION C - To be Completed by FLETC Security

1. NCIC Check: No Results Found Results Found

2. Type of Badge to be Issued:: 5 Day or Less Contractor 5 Day or Less Visitor
 Frequent Visitor One Time Vendor
 Frequent Vendor Graduation Guest

3. OSPR Decision: Approved Denied
Approved Start Date: Approved Expiration Date:
OSPR Initials: Date:

Notes: