

## Revised on February 18th 2020 **USAF Base Access Affidavit**

This data will be used to screen individuals who have or are seeking access to US Air Force installations or facilities controlled by the US Air Force. Please answer each question. Access will be denied if this questionnaire is incomplete or missing from the Contractor Access packet. This information will be used to generate state and federal criminal history records checks.

### **A. PERSONAL INFORMATION**

1. NAME (PRINT LAST, FIRST, MIDDLE): \_\_\_\_\_ 2. EMAIL: \_\_\_\_\_
3. FULL MAIDEN NAME OR ALIAS: \_\_\_\_\_
4. SEX: \_\_\_\_\_
5. SSAN: \_\_\_\_\_ 6. DATE OF BIRTH: \_\_\_\_\_ 7. RACE: \_\_\_\_\_
8. HAIR COLOR: \_\_\_\_\_ 9. EYE COLOR: \_\_\_\_\_ 10. HEIGHT: \_\_\_\_\_ 11. WEIGHT: \_\_\_\_\_
12. DRIVERS LICENSE #: \_\_\_\_\_ 13. STATE: \_\_\_\_\_ 14. HOME AND CELL PHONE #: \_\_\_\_\_
15. CURRENT AND ON-ISLAND RESIDENCE ADDRESS: \_\_\_\_\_
16. CITY: \_\_\_\_\_ 17. STATE: \_\_\_\_\_ 18. ZIP CODE: \_\_\_\_\_ 19. HOW MANY YEARS ON ISLAND? \_\_\_\_\_

### **B. PLACE OF BIRTH**

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ COUNTRY: \_\_\_\_\_ CITIZENSHIP: \_\_\_\_\_

### **C. CRIMINAL HISTORY** (Check Appropriate YES/NO Box)

- |   |     |    |
|---|-----|----|
| 1. Have you ever been barred from entry/access to any military installation or facility?<br><b>Date</b> _____ <b>Installation</b> _____   | YES | NO |
| 2. Are you wanted by federal or civilian law enforcement authorities, regardless of offense or violation?<br>(i.e., has a judge issued an order for your arrest?)   | YES | NO |
| 3. Have you ever been convicted of a firearms or explosives violation?  | YES | NO |
| 4. Have you ever been incarcerated for 12 months or longer?   | YES | NO |
| 5. Have you ever been convicted of espionage, sabotage, treason or terrorism, murder, assault, sexual assault, YES<br>Armed assault or robbery, rape, child molestation, drug possession, or drug distribution? | YES | NO |

### **D. IMMIGRATION/WORKING STATUS** (attach copies of all documentation)

Circle appropriate answer, and provide proper numbers.

- |  |                  |                      |                    |
|--|------------------|----------------------|--------------------|
| 6. Do you have a VISA?   | YES              | NO                   | VISA # _____       |
| A. What type of VISA?  | Immigration VISA | Non-Immigration VISA |                    |
| B. What VISA Classification?   | H2               | W1                   | B1 Other _____     |
| 7. Do you have a Form I-551 (Resident Alien/Green Card)?                                   | YES              | NO                   | I-551 # _____      |
| 8. Do you have an I-94?  | YES              | NO                   | I-94 # _____       |
| 9. Do you have an Employment Authorization Document or WAC?                                | YES              | NO                   | EAD/WAC # _____    |
| 10. Do you have other Immigration Documents?<br>(If YES, list type of document and number) | YES              | NO                   | Document & # _____ |

### **NOTE TO APPLICANT: ATTESTATION**

I attest to the fact that I have been briefed by my employer and understand the purpose for the background check. I understand the information on this form is being collected in accordance with 50 U.S.C., Section 797, and DoDD 5200.8 federal laws permitting the installation commander to limit access to the installation for security reasons and that this data will be used to screen personnel who have or are seeking access to US Air Force installations. I have voluntarily completed this "Form" and shall provide the Air Force a specimen of my fingerprints, if/when requested. I understand that by signing this application, I acknowledge that I have been made aware of and have reviewed that Air Force's list of "disqualifying factors" above. I hereby give my consent and authorization for the Air Force to conduct any additional background screenings deemed necessary over the next 12 months, to include comparing/checking my fingerprints against local, state, and federal criminal databases. The information I have provided on this application is true, complete, and correct to the best of my knowledge and belief, and is provided in good faith. I understand that a knowing and willful false statement on this application can be punished by a fine or imprisonment or both. (18 U.S.C. Section 1001)

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Office Name: \_\_\_\_\_

Office Number: \_\_\_\_\_

Processing Officer: \_\_\_\_\_