Revised on September 21, 2012 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 A. PERSONAL INFORMA		ractor Access pa	acket. This in	formation will be used to generate state and federal cri	ninal history records checks.
1. NAME (PRINT LAST, FIRST, MIDDLE):				2. EMAIL:	
3. MAIDEN NAME OR ALIAS:					
4. SEX: 5. SSAN:			E OF BIR	TH: 7. RACE:	
8. HAIR COLOR: 9. EYE COLOR:		10. HEIGHT:		11. WEIGHT:	
12. DRIVERS LICENSE #: 12.		3. STATE:		14. HOME AND CELL PHONE #:	
15. CURRENT AND ON-ISLAND R	RESIDENCE ADDRESS:				
16. CITY:	17. STATE:	18. ZIF	P CODE: _	19. HOW MANY YEARS O	N ISLAND?
B. PLACE OF BIRTH					
CITY:	STATE:	COUNTRY	/:	CITIZENSHIP:	
C. CRIMINAL HISTORY	(Circle YES/NO)				
1. Have you ever been barred from entry/access to any military installat Date Installation			-	YES NO	
2. Are you wanted by federal or c (i.e., has a judge issued an order	civilian law enforcement author			nse or violation? 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 NO Armed assault or robbery, rape, child molestation, drug possession, or drug distribution?					
D. IMMIGRATION/WORK					
Circle appropriate answer, and provide	de proper numbers.				
6. Do you have a VISA?		YES	NO	VISA#	
A. What type of VISA?		Immig	ration VIS	A Non-Immigration VISA	
B. What VISA Classification?	•	H2	W1	B1 Other	
7. Do you have a Form I-551 (Re	esident 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? (If YES, list type of document and number)		YES	NO	Document & #	
NOTE TO APPLIC	ANT: ATTESTAT	ΓΙΟΝ			
I attest to the fact that I have been bri accordance with 50 U.S.C., Section 7 data will be used to screen personnel specimen of my fingerprints, if/when list of "disqualifying factors" above. next 12 months, to include comparing	efed by my employer and understa 197, and DoDD 5200.8 federal laws who have or are seeking access to requested. I understand that by sig I hereby give my consent and auth g/checking my fingerprints against by knowledge and belief, and is pro-	nd the purpose permitting the US Air Force i gning this appli orization for the	e installation installations ication, I ac ne Air Force d federal cr	kground check. I understand the information on a commander to limit access to the installation for a limit acceptance of a li	or security reasons and that this shall provide the Air Force a nave reviewed that Air Force's gs deemed necessary over the led on this application is true,
Applicant Signature:				Date:	
Office Name:				Office Number:	
Processing Officer:					