



**Search**

\*Search Method

Phone

\*Date of Birth

03/22/1931

\*Biometric

\*Country Code

United States (+1)

\*Phone

202-867-5309

Search

Clear

**Appointments**

Last Name	First Name	MI	Program	Service	Appointment
Kirk	James	T	Pre	Post-Enrollment Biometrics	9:00am
Clever	Joe	D	Pre	Enroll	9:15am
Grey	Steven	R	TWIC	Enroll	9:30am
Thompson	Joanne	C	TWIC	Activate Card	10:15am
Clark	James	F	Pre	Enroll	10:30am
Gregory	George	S	Pre	Enroll	10:30am
Williams	Amy	A	TWIC	Post-Enroll	10:45am
Hartwell	Paul	R	TWIC	Enroll	11:00am
Wells	Steve	H	TWIC	Reset Card PIN	11:30am
Anderson	Robert	J	Pre	Enroll	12:00pm
Cook	John	D	Pre	Enroll	12:15pm
Fellows	Keith	W	TWIC	Reset Card PIN	12:30pm
Simmons	Chris	N	Pre	Enroll	12:45pm
Hoover	Richard	K	TWIC	Post-Enrollment Biometrics	1:00pm
Lester	David	D	TWIC	Activate Card	1:30pm
Freeman	Steven	S	TWIC	Enroll	1:45pm

Print Appointments

**Message Center**

Date	Subject
! 07/16/13	Service Outage
07/10/13	Training Module Due

Admin

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\*Search Method

\*Date of Birth

\*Biometric

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\*Phone

**Appointments**

Last Name	First Name	MI	Program	Service	Appointment
Kirk	James	T	Pre	Post-Enrollment Biometrics	9:00am

**Message Center**

Date	Subject
! 07/16/13	Service Outage
07/10/13	Training Module Due

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Enter Customer Information

**Essential**

\*First Name

\*Middle Name

\*Last Name  Suffix

\*Gender

\*Date of Birth  
  
December 30, 1972

**Contact**

\*Preferred Language

\*Method of Contact (At least one method is required)

Email <input type="text" value="jkirk@enterprise.net"/>	Verify Email <input type="text" value="jkirk@enterprise.net"/>
Country Code <input type="text" value="United States (+1)"/>	Phone 1 202-867-5309
Country Code <input type="text" value="United States (+1)"/>	Phone 2 615-123-7645

\*Preferred Method of Contact

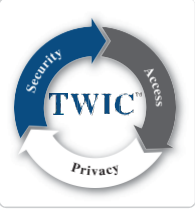
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### Select Program

Select Program



OR

Enter Service Code

Search

### Select Customer Service

Enroll

**Post-Enrollment Biometrics**

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**Privacy Act and Paperwork Reduction Act Statements****PRIVACY ACT STATEMENT:**

**Authority:** The authority for collecting this information is 49 U.S.C. 114 and 114note.

**Principal Purpose(s):** This information is needed to verify your identity to render you eligible for TSA Pre/® expedited biometric screening. Furnishing this information, including your SSN or alien registration number, is voluntary; however, all information provided during the enrollment process assists in the timely processing of your biometric screening eligibility. Failure to provide it will delay and may prevent completion of your biometric screening eligibility.

**Routine Uses:** Principal disclosures include disclosure to the FBI to retrieve your criminal history record; to TSA contractors or other agents who are providing services relating to the security threat assessments; and to appropriate governmental agencies for licensing, law enforcement, or security purposes, or in the interests of national security. For additional information regarding disclosures, please see system of records notice DHS/TSA-021, TSA Pre/® Application Program.

**PAPERWORK REDUCTION ACT STATEMENT:**

**Statement of Public Burden:** This is a voluntary collection of information, but failure to provide the information may result in an inability to approve your eligibility for the requested TSA program or benefit. TSA estimates that the total average burden per response associated with this collection for enrollment is approximately 9-12 minutes, not including travel or wait time. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The control number for this collection is OMB Control No. 1652-0059, which expires 05/31/2015.

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Determine Citizenship

Note: At this time, only U.S. citizens, U.S. Nationals and lawful permanent residents (LPR) are eligible for the application.

\*Country of Birth

United States

\*City of Birth

Riverside

\*State/Province of Birth

Iowa

\*Country of Citizenship

United States

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Determine Documents

\*Document

Drivers License issued by a State, or outlying possession of the U.S.

Certify birth certificate as proof of citizenship (you are not required to have birth certificate in your possession). **\$20 IdentoGO Birth Certificate Certification service fee will be applied.** This is an optional convenience service offered by the TSA Pre/® service provider and not required by the TSA.

Additional Document

Required Identity Documents

Drivers License issued by a State, or outlying possession of the U.S.

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Accepted ✓



\*Document Number:

123456789

\*Driver License Class

D

\*Issuance Date:

11/25/2005

November 25, 2005

\*Expiration Date:

11/24/2015

November 24, 2015

\*Country of Issue

United States

\*State/Province of Issue

Tennessee

HME Endorsement

Comment:

Empty text box for comment.

Flatbed Scan

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Answer Personal Questions

- \* 1. Have you ever used a maiden/previous name? Yes No
- \* 2. Have you ever used an alias? Yes No
- \* 3. Is your mailing address the same as your residential address? Yes  No
- \* 4. **Have you lived at your current residential address for more than five (5) years?** Yes No

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Enter Personal Information

First Name	Middle Name	Last Name	Suffix	Date of Birth	Gender
James	Tiberius	Kirk		03/22/1931 March 22, 1931	Male

US  Metric

\* Height  ft  in  lbs

\* Hair Color

\* Eye Color

Social Security Number

\*\*\*\*\*

Social Security Number

111-08-5114

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Enter Mailing Address

\* Country

United States

\* Address Line 1

15 Century Blvd

Address Line 2

\* City

Nashville

\* State/Province

Tennessee

\* Postal Code

37214 - 0129

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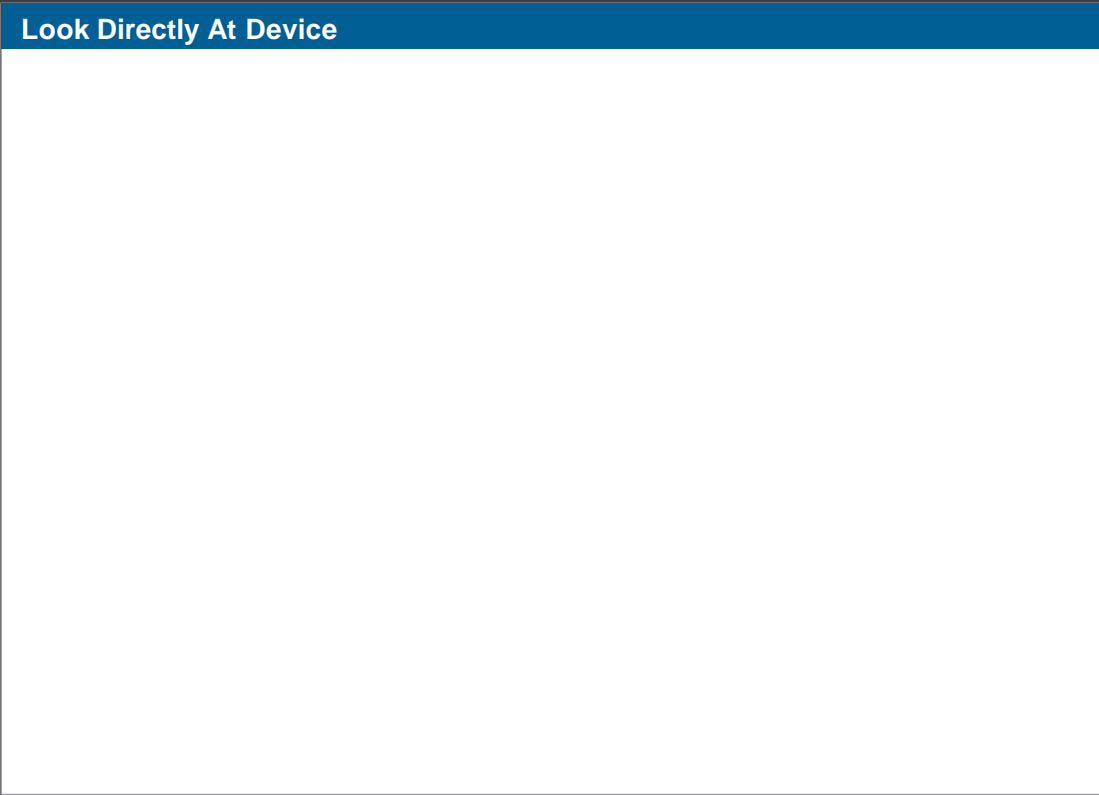
Fee

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Comment:

**Capture**

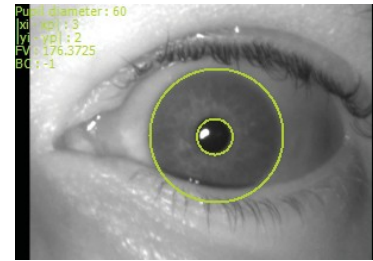
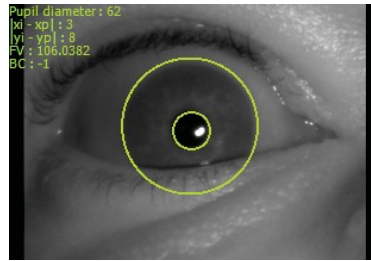
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Accepted ✓



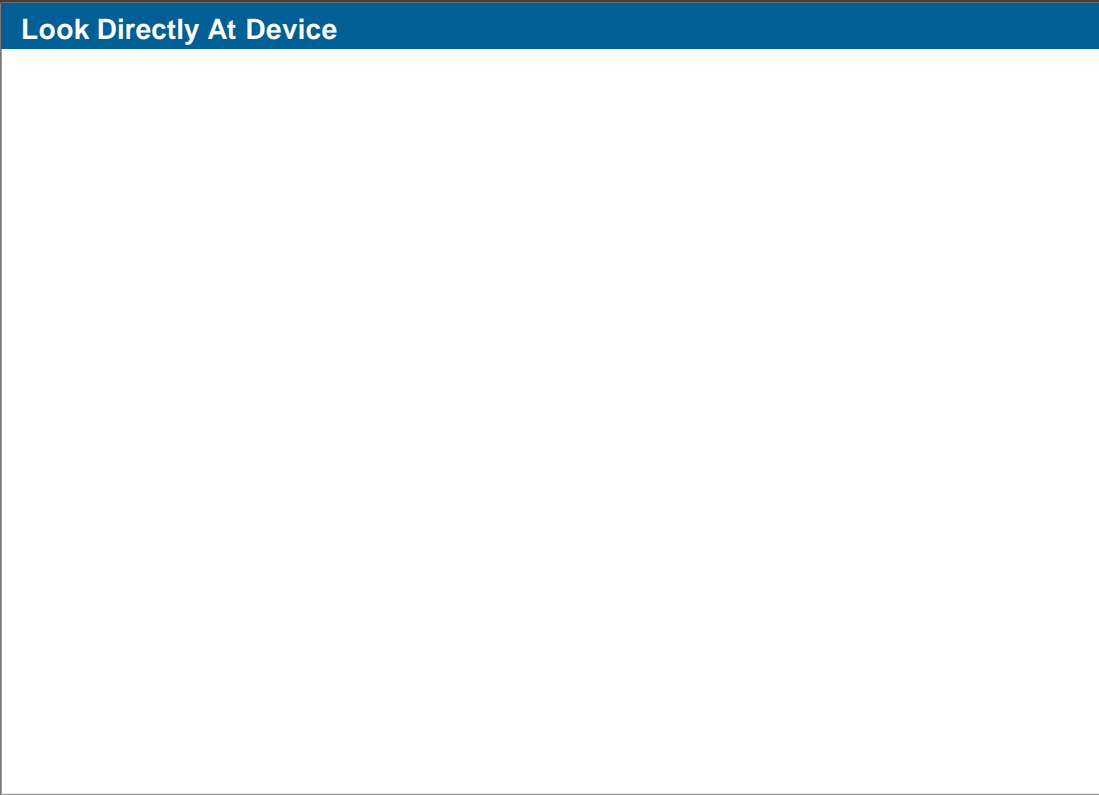
Comment:

Capture

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Comment:

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Accepted ✓

```
Pupil diameter: 62  
|x0 - xp| : 3  
|y0 - yp| : 8  
FV: 106.0382  
BC: -1
```

Comment:

Capture

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Answer Questions

**Note:** If you answer 'Yes' to question 2,3, 4 or 6 you may want to reconsider applying. If you answer 'Yes' to question 5, because you are currently under indictment or have open criminal charges, you should consider waiting to apply until these matters are resolved. Application enrollment fees are not refunded.

- |  |     |    |                                  |
|--|-----|----|----------------------------------|
| 1. Are you a U.S. citizen or U.S. National?  | Yes | No | <input type="radio"/>            |
| 2. Excluding juvenile cases unless convicted as an adult, have you been convicted, pled guilty including "no contest" (nolo contendere), or found not guilty by reason of insanity, of any disqualifying felony listed in TSA Eligibility Requirements, Part A, in any jurisdiction, military or civilian?   | Yes | No | <input checked="" type="radio"/> |
| 3. Excluding juvenile cases unless convicted as an adult, have you been convicted, pled guilty including "no contest" (nolo contendere), or found not guilty by reason of insanity, of any disqualifying felony listed in TSA Eligibility Requirements, Part B, in any jurisdiction, military or civilian, during the 7 years before the date of this application? | Yes | No | <input checked="" type="radio"/> |
| 4. Have you been released from incarceration in any jurisdiction, military or civilian, for committing any disqualifying felony listed in TSA Eligibility Requirements, Part B, during the 5 years before the date of this application?  | Yes | No | <input checked="" type="radio"/> |
| 5. Are you wanted or under indictment for any disqualifying crime listed in TSA Eligibility Requirements, Part A and B?  | Yes | No | <input checked="" type="radio"/> |
| <b>6. Have you ever been found by a court or other lawful authority as lacking mental capacity or involuntarily committed to a mental institution?</b>   | Yes | No | <input checked="" type="radio"/> |

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Accepted ✓

I understand my continuing obligation to notify TSA (at TSA.gov) within 24 hours if I am convicted or found not guilty by reason of insanity of any disqualifying crime, or adjudicated as a mental defective or committed to a mental institution, while I am enrolled in the TSA Pre/® Application Program.

The information I 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, or an omission of a material fact can be punished by fine or imprisonment or both (see section 1001 of Title 18 United States Code), and may be grounds for denial of my application for the TSA Pre/® application program by TSA.

Applicant Signature:

*James T. Kirk*

Comment:

Empty comment box

Translator used to interpret disclosure

*[Handwritten signature]*

Comment:

Empty comment box

Scan

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## Answer Survey Questions

1. Are you satisfied with the your overall experience at the enrollment center today?
2. If you experienced an issue that required a resolution, are you satisfied with the resolution?
3. Did the enrollment center representative(s) conduct themselves in a professional and courteous manner?
4. Are you satisfied with the enrollment center appearance?
5. Are you satisfied with the enrollment center location?

If no, please select from one of the following reasons:

- 1 - *Not convenient to work*
- 2 - *Not convenient to home*
- 3- *Not convenient to highways*
- 4- *Not convenient to public transportation*
- 5 - *Location is not in a desirable area*

6. How did you hear about the TSA PreCheck Application Program?

- 1 - *Sign/brochure at airport*
- 2 - *Family/friend*
- 3- *Co-worker/Enp*
- 4- *Media/News Article*
- 5 - *Advertisement*
- 6 - *Social Media*

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Access Agent's TWIC

\*PIN

\*\*\*\*\*

Access



Steven Jones

Place Right or Left Finger on Device

By placing my finger on the device, I, STEVEN JONES, certify that the information captured for **John Smith** has been reviewed and verified.

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Summary

Customer:	<b>JAMES T. KIRK</b>
KTN:	<b>UNASSIGNED</b>
UE ID:	<b>U11F-193H9F</b>
TSA PRE/® POST-ENROLLMENT BIOMETRICS	<b>0.00</b>
IdentoGO BC CERTIFICATION	<b>0.00</b>
Total Fee:	<b>0.00</b>
Auth Code: 3154N66515RYZB	<b>0.00</b>
CARD (1475):	<b>0.00</b>
Auth Number:	<b>123ABC</b>

Date/Time:  
07/16/2013 / 8:56 AM

Enrollment Location:  
Nashville, TN (8023)

Notification Method:  
[jkirk@enterprise.net](mailto:jkirk@enterprise.net)

Customer Support:  
[universalenroll.dhs.gov](http://universalenroll.dhs.gov)

Reprint

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Finish