

**Instructions:** Use of this form is optional. You may use any written format for a Freedom of Information (FOIA) or Privacy Act (PA) Request as long as it contains a description of the information you are requesting and sufficient personally identifying data when required. Failure to provide the required information may result in no action being taken on the request. Submit completed forms via fax, mail, or e-mail as scanned attachments. If submitting via e-mail, you should ensure that the security of your e-mail system is adequate for transmitting sensitive information before choosing to transmit your request, which contains your personally identifiable information. *Mail:* OPM-Federal Investigative Services; ATTN: FOI/PA office, 1137 Branchton Road, P.O. Box 618, Boyers, PA 16018. *Fax:* (724) 794-4590. *e-Mail:* FISFOIPARRequests@opm.gov.

**1. Type of Request - (This section must be completed.)**

**PA/FOIA Request:**

I request my own records. (Requester must complete sections 2, 3, 4, and 6.)

**FOIA Request:**

I am making a request for records about someone or something other than myself. (Requester must complete sections 2, 3, and 7.)

**PA Amendment Request:**

I wish to amend my own records. In accordance with 5 C.F.R. § 297.301, the burden of proof rests with the record subject to illustrate how his/her record is not accurate, timely, relevant, or complete. Requesters should attach additional material to this form. (Requester must complete sections 2, 4, and 6.)

**2. Requester Information - (This section must be completed.)**

Full Name:   
Street Address:   
City:  State:  Zip Code:   
Country:

**Preferred Delivery Method:**  Secure e-Mail e-Mail Address:   
 U.S. Mail

**Optional:** Telephone Number:

**3. Records Requested (Select One)**

- Standard Form Only (SF86, 85P, or 85)
- Most Recent Investigation, including Standard Form
- All Investigations and Standard Forms
- Other (Specify in the box below) - Attach a separate page if you need more space than provided below.

**4. Requester's Identifying Information - (Complete this section only if you are making a request for records about yourself.)**

Social Security Number:  Date of Birth: (MM/DD/YYYY)

City of Birth:  State of Birth:

Country of Birth:

**5. Optional: Authorization to Release Information to a Third Party.**

By completing this section, you authorize information relating to you to be released to another person, such as a family member or legal counsel. Please note, if you choose to have your records sent to a third party, you will not be furnished a duplicate copy. Pursuant to 5 U.S.C. § 552a(b), I authorize the United States Office of Personnel Management's, Federal Investigative Services to release my records (defined above) to:

Full Name:

Mailing Address:

**6. Verification of Requester's Identity - (Complete this section only if you are making a request for records about yourself.)**

I declare under the penalty of perjury under the laws of the United States of America that the foregoing is true and correct, and I am the person named in Section 2. I understand that any falsification of this statement is punishable under the provisions of 18 U.S.C. § 1001 by a fine of not more than \$10,000, or by imprisonment for not more than five years or both, and that requesting or obtaining any record(s) under false pretenses is punishable under the provisions of 5 U.S.C. § 552a(i)(3) by a fine of not more than \$5,000.

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

**7. Complete this section only if you are requesting records about someone or something other than yourself.**

In the box below, you may wish to provide information about yourself and the purpose of your request to help us determine your fee category. While FOIA does not require a requester to state the purpose of a request, fees may be reduced based on the nature of the requester or purpose of the request. Fees for searching, copying, and processing records in this category may be levied in accordance with OPM's regulations at 5 C.F.R. § 294.109. If you are asking for a waiver or reduction of fees, you can also use this box to provide an explanation. Attach a separate page if you need more space than provided below.

- I agree to pay all applicable fees.  I agree to pay up to a specific amount for fees. Specify the amount
- I request a waiver or reduction of fees because I am (check all options listed below that apply):
- Affiliated with an educational or noncommercial scientific institution and this request is not for commercial use.
  - A representative of the news media and this request is part of a news dissemination function and not for commercial use.
  - Requesting the information in order to contribute significantly to the public understanding of the operations or activities of the government and I do not primarily have a commercial interest in the information.

# FREEDOM OF INFORMATION / PRIVACY ACT RECORD REQUEST FORM

Form Approved  
OMB No. 3206-0259

**Privacy Act Statement.** Information provided by a requester will be used to locate and provide the requester responsive records pursuant to the Freedom of Information Act (5 U.S.C. § 552), and/or the Privacy Act of 1974 (5 U.S.C. § 552a). Authority to collect this information is contained in 5 U.S.C. § 552, 5 U.S.C. § 552a, 5 C.F.R. § 297.201(b). The purpose of the collection is to enable the United States Office of Personnel Management (OPM) Federal Investigative Services to locate applicable records and to respond to requests made under the Freedom of Information Act and the Privacy Act of 1974. Failure to provide the required information may result in no action being taken on the request.

**Routine Uses.** The information collected on this form will primarily be used to comply with requests for information under Title 5 U.S. Code 552 and 552a. Routine uses of the records include:

- To disclose information to the Office of Management and Budget at any stage in the legislative coordination and clearance process in connection with private relief legislation as set forth in OMB Circular No. A-19.
- To disclose information to an agency, subject to law, rule, or regulation enforced by OPM having been found in violation of such law, rule, or regulation, in order to achieve compliance with OPM instructions.
- To disclose information to Federal agencies in order to obtain advice and recommendations concerning matters on which the agency has specialized experience or particular competence, for use by OPM in making required determinations under the Freedom of Information Act or the Privacy Act of 1974.
- To disclose information to any source from which additional information is requested (to the extent necessary to identify the individual, inform the source of the purpose of the request, and to identify the type of information requested), where necessary to obtain information relevant to an OPM decision concerning a Privacy or Freedom of Information Act request.
- To disclose to the Federal agency involved, an OPM decision on an appeal from an initial denial of a request involving OPM-controlled records.
- To disclose pertinent information to the appropriate Federal, State, or local agency responsible for investigating, prosecuting, enforcing, or implementing a statute, rule, regulation, or order, where OPM becomes aware of an indication of a violation or potential violation of civil or criminal law or regulation.
- To provide information to a congressional office from the record of an individual in response to an inquiry from that congressional office made at the request of that individual.
- To disclose information to another Federal agency, to a court, or a party in litigation before a court or in an administrative proceeding being conducted by a Federal agency, when the Government is a party to the judicial or administrative proceeding. In those cases where the Government is not a party to the proceeding, records may be disclosed if a subpoena has been signed by a judge.
- To disclose information to the National Archives and Records Administration for use in records management inspections.
- By OPM in the production of summary descriptive statistics and analytical studies in support of the function for which the records are collected and maintained, or for related workforce studies. While published studies do not contain individual identifiers, in some instances the selection of elements of data included in the study may be structured in such a way as to make the data individually identifiable by inference.
- To disclose information to the Department of Justice, or in a proceeding before a court, adjudicative body, or other administrative body before which OPM is authorized to appear, when: (1) OPM, or any component thereof; or (2) Any employee of OPM in his or her official capacity; or (3) Any employee of OPM in his or her individual capacity where the Department of Justice or OPM has agreed to represent the employee; or (4) The United States, when OPM determines that litigation is likely to affect OPM or any of its components; is a party to litigation or has an interest in such litigation, and the use of such records by the Department of Justice or OPM is deemed by OPM to be relevant and necessary to the litigation provided, however, that the disclosure is compatible with the purpose for which records were collected.
- To disclose information to officials of the Merit Systems Protection Board or the Office of the Special Counsel, when requested in connection with appeals, special studies of the civil service and other merit systems, review of OPM rules and regulations, investigations of alleged or possible prohibited personnel practices, and such other functions, e.g., as promulgated in 5 U.S.C. 1205 and 1206, or as may be authorized by law.
- To disclose information to the Equal Employment Opportunity Commission when requested in connection with investigations into alleged or possible discrimination practices in the Federal sector, compliance by Federal agencies with the Uniform Guidelines on Employee Selection Procedures or other functions vested in the Commission and to otherwise ensure compliance with the provisions of 5 U.S.C. 7201.
- To disclose information to the Federal Labor Relations Authority or its General Counsel when requested in connection with investigations of allegations of unfair labor practices or matters before the Federal Service Impasses Panel.

**Information Regarding Disclosure of your Social Security Number (SSN) under Public Law 93-579, Section 7 (b).** Solicitation of SSNs by OPM is authorized under the provisions of Executive Order 9397, dated November 22, 1943. Providing your social security number is voluntary. You are asked to provide your social security number only to facilitate the identification of records relating to you. Without your social security number, OPM may be unable to locate records pertaining to you. The use of SSNs is necessary because of the large number of Federal employees, contractors, civilians and military personnel who have identical names and/or birth date and whose identities can only be distinguished by their SSNs.

**Public Burden Statement.** Public burden reporting for this collection of information is estimated to vary from 5 to 15 minutes with an average of 5 minutes per response, including time for reviewing instructions, searching existing data sources, gathering the data needed, and completing and reviewing the collection of information. Send comments regarding the accuracy of this burden estimation and any suggestions for reducing the burden to: U.S. Office of Personnel Management, Federal Investigative Services, Attn: OBM Number (3206-), 1900 E. Street NW, Washington, DC 20415-7900.