

DEPARTMENT OF HOMELAND SECURITY  
Transportation Security Administration

**FOREIGN NATIONAL VISITOR REQUEST – INDIVIDUAL**

**INSTRUCTIONS:** To access TSA facilities within the U.S. and its Territories, Foreign Nationals must be vetted in accordance with [TSA MD 2800.15, Foreign Visitor Management](#). [DHS MD 11052, Internal Security Program](#), requires that Department Agencies report Foreign National Visitor Data to the DHS Chief Security Officer (CSO) via the DHS Foreign National Vetting System. The TSA office sponsoring the visit is responsible for obtaining the required vetting information from the foreign national and then submitting the information through one of two established procedures at least twenty (20) business days in advance of the visit. The primary procedure to request the vetting of foreign nationals is through the iShare online [Security Appointment Center \(SAC\) Visitor Request Form](#).

If the TSA sponsor cannot access the online SAC Form, then the sponsor is required to submit [TSA Form 2816A, Foreign National Visitor Request - Individual](#), or for a group of foreign nationals of two or more, [TSA Form 2816B, Foreign National Visitor Request - Group](#), at least twenty (20) business days in advance of the visit, to the Security Branch, Security Services and Assessments Division, OLE/FAMS to the following address: [ForeignVisitor.TSA@tsa.dhs.gov](mailto:ForeignVisitor.TSA@tsa.dhs.gov). NOTE: **This form is for internal TSA use only.**

**FOREIGN NATIONAL VISITOR DATA**

<b>Full Name</b> ( <i>Family Name, followed by all other names on passport</i> )		<b>Country of Citizenship</b>
<b>Gender</b>	<b>Date of Birth</b>	<b>Country of Birth</b>
<b>Passport Country</b>	<b>Passport Number</b>	<b>Passport Expiration Date</b>
<b>Employer</b>		<b>Country of Employer</b>
<b>Title or Position</b>	<b>Email</b>	<b>Phone Number</b>

**TSA SPONSOR DATA**

<b>Sponsor Name</b>	<b>Sponsor Title/Position</b>	
<b>Sponsor Email</b>	<b>Sponsor Phone Number</b>	<b>Alternate Phone Number</b>
<b>Sponsor Organization/Location</b>		
<b>Date of Request</b>	<b>Visit Start Date</b>	<b>Visit End Date</b>
<b>TSA Escort</b>	<b>Escort Phone Number</b>	<b>Escort Email</b>

If any of the following categories of information are requested to be shared with the visitors, the sponsor will be directed to the appropriate office(s) for further action.

<b>CLASSIFIED NATIONAL SECURITY INFORMATION</b>	<b>OTHER</b>
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**Purpose of Visit**

**Location(s) of Visit** (*List all that apply*)

**FOR OFFICE OF SECURITY USE ONLY**

<b>Processed by</b> ( <i>Name</i> )	<b>Date Entered into ISMS</b>	<b>FNV Number</b>
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**Paperwork Reduction Act Statement:** Through this voluntary information collection, TSA is gathering information to facilitate your request for access to TSA facilities. It is estimated that the total average burden per response associated with this collection is approximately 0.01667 hours. 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 assigned to this collection is OMB 1652-0068, which expires 11/30/2020. Send comments regarding this burden estimate or any other aspect of this collection of information including suggestions for reducing this burden to TSA PRA Officer, 601 S. 12th Street, Arlington, VA 20598-6011. ATTN: PRA 1652-0068.

*Previous editions of this form are obsolete.*