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DEFENSE COUNTERINTELLIGENCE AND SECURITY AGENCY
FEDERAL INVESTIGATIONS PROCESSING CENTER
PO BOX 618
BOYERS, PA 16018-0618

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INSTRUCTIONS: We are conducting a background investigation on the person identified below to determine this person's eligibility for employment or security clearance. To help make this determination, we ask that you complete all items on the back of this form and return the form in the enclosed envelope.

PRIVACY ACT STATEMENT: The information you provide, including your identity, will be furnished to the agency requesting the investigation, other agencies as warranted, and to the person investigated upon his or her specific request. **AUTHORITY:** Section 925 of Public Law 115-91; 5 USC 301 and 9101; Executive Order 13467, as amended by Executive Order 13869; and 5 CFR 736. **PRINCIPAL PURPOSE:** To obtain background information and personal records for investigating and determining an individual's initial or continued: eligibility for access to classified national security information or assignment to positions with sensitive duties, suitability for enlistment or appointment into military service, suitability for federal employment, fitness for assignment to work under contract for or on behalf of the government, or eligibility for physical or logical access to U.S. Government systems or facilities. **ROUTINE USES:** The information collected may be disclosed to DCSA personnel and shared externally with other authorized government agency personnel as a routine use when necessary and relevant to personnel vetting investigations, determinations, and adjudications; and, for other purposes permitted under subsection (b) of the Privacy Act of 1974, as amended (5 USC §552a). Information obtained will also be released to the person being investigated upon their request unless otherwise exempt. A complete list of the routine uses can be found in the system of records notice for the Department of Defense Personnel Vetting Records System, "DUSDI 02-DoD" at: <https://www.federalregister.gov/documents/2018/10/17/2018-22508/privacy-act-of-1974-system-of-records>. **DISCLOSURE:** Disclosure is voluntary. However, failure to provide DCSA access to the requested information may result in our agency's inability to conduct a thorough investigation and may prevent the government from making a determination or adjudication regarding the qualifications, suitability, eligibility or fitness of the person being investigated.

The Defense Counterintelligence and Security Agency is authorized by Statute, Presidential Executive Order and Federal Regulations to make this investigative inquiry.

- Request covered by the Security Clearance Information Act (5 USC 9109)
 Request not covered by the Security Clearance Information Act

Completion and return of this original form as soon as possible will help this person and the agency perform their duties in a more timely and efficient manner.

CASE NUMBER: CASE TYPE: ITEM NUMBER:

FULL NAME (LAST, FIRST, MIDDLE)			
OTHER NAMES USED			
DATE OF BIRTH	SOCIAL SECURITY NUMBER	POSITION REQUIRING INVESTIGATION	
PLACE OF BIRTH			
CURRENT RESIDENCE			
THIS PERSON CLAIMS THE FOLLOWING CRIMINAL HISTORY RECORD AT YOUR LOCATION			
DATE (MO/YR)	DATE (MO/YR)		
OFFENSE:	OFFENSE:		
ACTION:	ACTION:		
LAW ENFORCEMENT AUTHORITY OR COURT			
CLAIMED RESIDENCE AT TIME OF OFFENSE			

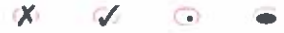
**MARKING
INSTRUCTIONS**

CORRECT MARK:



- USE A NO. 2 PENCIL OR BLUE OR BLACK INK PEN ONLY.
- DO NOT USE PENS WITH INK THAT SOAKS THROUGH THE PAPER.
- DO NOT MAKE ANY STRAY MARKS ON THIS SHEET.

INCORRECT MARKS:



PLEASE COMPLETE THE ITEMS SHOWN BELOW

1 MARK THE FOLLOWING AS APPLICABLE:

- a WE HAVE NO RECORD ON THIS PERSON b RECORD INFORMATION SHOWN BELOW c RECORD AT ANOTHER LOCATION
(Enter address and ZIP Code in Remarks)

**2 PLEASE PROVIDE DETAILS CONCERNING CRIMINAL HISTORY RECORD AND/OR OUTSTANDING WARRANT(S).
IF OUTSTANDING WARRANT(S) EXIST, LIST THE NATURE OF THE ORIGINAL CHARGE.
PLEASE SHOW THE EXACT NATURE OF THE CHARGE - DO NOT USE CODES OR ABBREVIATIONS.**

DATE	OFFENSE	DISPOSITION AND DATE	LOCATION OF DISPOSITION (COURT & CITY)

- 3** FILL IN THIS MARK IF RECORD IS ATTACHED
 IF ADDITIONAL REMARKS ARE PROVIDED BELOW, YOU MUST FILL IN THIS MARK
**REMARKS, ADDITIONAL INFORMATION THAT MAY HAVE A BEARING ON THIS PERSON'S
ELIGIBILITY FOR EMPLOYMENT OR SECURITY CLEARANCE.**

PUBLIC BURDEN STATEMENT: The public reporting burden for this collection of information, OMB 0705-0003, is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at whs mc alex.esd mbr dd dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

PRINT NAME:

SIGNATURE:

DATE

YOUR TITLE/ORGANIZATION:

**DAYTIME TELEPHONE NUMBER
(INCLUDE AREA CODE)**

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FOR DCSA USE ONLY

RESULTS

- | | |
|------------------------------------|-------------------------------|
| AC ACCEPTABLE | IS ISSUES |
| AA ACCEPTABLE/ATTACHED | PI CONFIDENTIAL/ISSUES |
| PA CONFIDENTIAL/ACCEPTABLE | RI RECORD INCONCLUSIVE |
| NI NO PERTINENT INFORMATION | FR FEE REQUIRED |
| NR NO RECORD | RL RELEASE REQUIRED |
| ND NOT LOCATED | SR SUBJECT UNKNOWN |
| UC UNABLE TO CONTACT | NZ NOT AVAILABLE |
| RE REFERRED | DN DISCREPANT |
| RR RECORD | |

ISSUES/CHARACTERIZATION

- | | |
|--|---|
| 1 <input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (D) <input type="radio"/> (E) <input type="radio"/> (N) | 9 <input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (D) <input type="radio"/> (E) <input type="radio"/> (N) |
| 2 <input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (D) <input type="radio"/> (E) <input type="radio"/> (N) | 10 <input type="radio"/> (A) <input type="radio"/> (B) <input type="radio"/> (C) <input type="radio"/> (D) <input type="radio"/> (E) <input type="radio"/> (N) |
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