Department of Justice

Bureau of Alcohol, Tobacco, Firearms and Explosives

30-Day Alien Suitability Request

Instructions: The purpose of this form is to relay the status of an illegal alien currently sponsored by ATF and to request continued use of the individual as an ATF confidential informant (CI). In addition to the standard suitability reviews conducted during January and July, the primary handler must also submit this request every 30 days. The ATF special agent (SA) or ATF task force officer (TFO) serving as the primary handler must interview the CI in-person and conduct indices checks to complete this form. Handwritten forms are not acceptable. Information obtained must be compared against the Initial Suitability Request, Reactivation Suitability Request, or Semiannual Suitability Request, whichever is most recent. The request and all attachments must be uploaded in the Confidential Informant Master Registry and Reporting System (CIMRRS). The 30-Day Alien Suitability Request must be submitted by the primary handler to begin the workflow process. Once a final determination is made, a copy of the completed form must be provided to the Alien Program Manager. To clarify, the 30-Day Alien Suitability Request is not required for illegal aliens not sponsored by ATF.

CI Number:	Date:		30-Day Alien Sui	tability Request for:		
			Month:	Year:		
	<u> </u>	I. Summary	<u> </u>			
Instructions : Provide inform	nation regarding the CI and the CI's activ	vity with ATF.				
1. Activation Date:		2. Active	2. Active (est.) Years and Months:			
		Years:		Months:		
3. Did an in-person interview details, skip number 4.)	w take place for this 30-Day Alien Suitab	bility Request? Ye	s No If i	no, explain in detail w	hy not. (After providing	
4. Date of In-Person Intervie	5. Privacy Notice: The I gathering any informa CI Handler Initials:			of the form) was read a	loud to the CI before	
6. Residential Physical Addr	ess (Line 1):	7. Addres	ss (Line 2):			
8. City:	9. St	tate:		10	. Zip Code:	
11. Mobile Telephone Number:		12. Hon	12. Home Telephone Number:			
	CI support any investigation(s) during th and Amount of Evidence Seized, and Nu				(Case) Number,	
Investigation (Case) Number	Investigation Type	Туј	pe/Amount of Evide	nce Seized	Number of Defendants Arrested	

14. Anticipated Use: Describe the anticipated duration of the continued use of this individual (e.g., CI needs to be utilized until (date), CI needs to be utilized until the case is adjudicated, CI will need to be utilized until the investigation is closed, etc.).

Instructions : Provide the CI's immig who entered the U.S. without authoriz efforts to acquire a new approval must utilized until a renewed approval is accommod by approval process.	ation before he/she may continue to se be documented. If the approval has ex-	rve as a CI. If the approval will expired, the CI must be deactivated	expire within 90 days from to d. Or, at a minimum, the CI	today's da I must <i>no</i>	ate, ot be
Immigration Status:	15. Alien Number:		16. Immigration Docum	mentatio	n:
Illegal Alien					
Sponsoring Agency:	17. Approval Date:		18. Expiration Date:		
ATF					
19. DHS Renewal Package: The rene the request package. (Choose one,		S approval will expire within 90 d	lays from today's date. Prov	vide the s	status of
Not yet required					
Submitted on:	Status:				
Will be sponsored by another fed- be updated to reflect the new info	eral, state, or local law enforcement or,	ganization (applying reciprocity).	(Note: The CIMRRS Immig	gration to	ab must
Name of Organization:	Approval D	Pate: Expiration I	Date:		
Other:					
Instructions: At a minimum, conduct conducted. Indices checks must be co checks regardless of whether the CI has	the listed criminal history checks. Incompleted on the CI's legal name and ali				
System/Check	Record/No Record	System/Check	Record/No	Record	
NCIC - QH		NLETS - IQ State:			
NCIC - QR		NLETS - IQ State:			
NCIC - QW		NLETS - FQ State:			
NLETS - IAQ		NLETS - FQ State:			
Other:		Other:			
	IV. Su	itability			
Instructions : Provide detailed and the from the CI, required indices checks, a information. Respond Yes or No to th	orough information regarding the indivind experience with use of the CI. Info	ridual's suitability to perform as a prmation obtained should be comp	pared to the CI record and pa		
20. Preface each question with this s Reactivation Suitability Request, So Alien Suitability Request).	tatement: Since the CI's most recent su emiannual Suitability Request, Long-Te			Yes	No
a. Has the CI's residential address	changed? If yes, provide the CI's new r	esidential address.			
b. Has the CI's telephone number home, work, etc.).	changed? If yes, provide the new telepl	none number(s) and type of telephone	one number (i.e., mobile,		
c. Has the CI displayed an issue w	ith following direction? If yes, explain	n detail.			
d. Has the CI been arrested? If yes of the arrest(s).	, provide the date of the arrest(s), reason	n for arrest(s), jurisdiction of the a	rrest(s), and disposition		
e. Has the CI had any contact with	h law enforcement, other than for an ar	rest or citation previously docum	ented by ATF, or while		

II. Immigration Information

Remarks, or attach an additional page.	responses to questi	ons 20. a. tinough c. If more space is required,	ase section v. Additional
22. Adverse Information: When derogatory, disparaging, emotional instability, unreliability, providing false info a CI, an Adverse Information Suitability Request to rerequest must be submitted. Since the last 30-Day Alie disqualifying information received about the CI?	ormation, subject of tain the CI must be on Suitability Requires No	finvestigation, charged in a pending prosecution estimated for approval; or a Deactivation Request was submitted was any derogatory, disparagi	n, etc.) is received regarding est or Removal for Cause
b. If yes, was an Adverse Information Suitability Req	uest submitted?	Yes No	
c. If an Adverse Information Suitability Request was	•	lain in detail why not.	
	V. Addition	nal Remarks	
Instructions : Use this section to provide further explanation be relevant (favorable or unfavorable) regarding the CI's c			ional information believed to
23. Remarks:			
	VI Unahl	e to Locate	
Attempts to locate the CI were met with negative results.		able, skip numbers 24 through 35)	
24. Provide a detailed description of all attempts to person	nally locate the CI.		
25. Residential Physical Address (Line 1):		26. Address (Line 2):	
27. City:	28. State:		29. Zip Code:
30. Last Known Mobile Telephone Number:		31. Last Known Home Telephone Number:	
32. Date of Last Contact: 33. Type of La	st Contact:		
34. Potential Concerns: During the last interaction with the indication of threat to the CI or his/her family? Did the anything to indicate a problem etc.). Yes No	ne CI appear to be		

35. DHS Contact: Was DHS advised that the CI could not be located Yes No If yes, provide details regarding the contact.					
Name of DHS Representative Contacted:			Date Contacted:		
Title of DHS Representative Contacted:			Telephone Number:		
What instructions,	if any, did the DHS representative provide	.?			
		VII. Attachments			
Instructions: Attac	chments are required as indicated, below. Th	e CI handler must initial to indicate the docum	nents are included.		
Title			Initial		
	al criminal history check results (NCIC - QI				
	l warrant check results (NCIC - QW) (Requ				
3. State criminal h	istory check results (NLETS - IQ & FQ) (R	equired)			
4. Immigration Ali	en Query check results (NLETS - IAQ) (Re	quired)			
5. Copy of DHS ap	oproval letter (Required only if CI will be sp	oonsored by another federal, state, or local l	aw enforcement organization)		
6. Other/miscellan	eous:				
7. Other/miscellan	eous:		*		
8. Other/miscellan	eous:				
		VIII. Handler Information			
Instructions: Prov Request in CIMRR		e CI handler must electronically sign and date	the request, then start the 30-Day Alien Suitability		
Name	Last Name:	First Name:	Title (SA or TFO):		
of Handler					
Field Division:		Field Office:	Telephone Number:		
		vidual for whom this request is being sought; signed accepts continued responsibility for ma	indices checks completed on the individual's legal nagement and oversight of the CI.		
Electronic Signatu	re and Date:				
IX. Review and Decision					
	als must complete their review and record the MRRS is not immediately available.	ir decision in CIMRRS. This section is only o	completed by management officials in an emergency		
		gent in Charge (RAC) or Group Supervisor pelow, unless the decision is made and reco	(GS). The RAC or GS must approve or deny the rded electronically in CIMRRS.		
Name of RAC or GS	Last Name:	First Name:	Title (RAC or GS):		
RAC or GS Decision	accepts responsibility for ma	Approve. Recommend Continued Use. The undersigned recommends approval for the continued use of the CI and accepts responsibility for management and oversight of the CI.			
	Program Manager and the Al	Deny. The request for this individual is denied. The CI must be deactivated or removed for cause. The CI Program Manager and the Alien Program Manager must be notified immediately.			
Electronic Signatu	re and Date:				

approve or deny the request. The SAC or his/her designee must sign and date, below, unless the decision is made and recorded electronically in CIMRRS. Last Name: First Name: Title (SAC or ASAC): Name of SAC or Designee Approve. The request for this CI is approved for continued use. The undersigned accepts responsibility for management SAC or Designee and oversight of the CI. Decision: Deny. The request for this individual is denied. The CI must be deactivated or removed for cause. The CI Program Manager and the Alien Program Manager must be notified immediately. Electronic Signature and Date:

Instructions: Provide information regarding the deciding official Special Agent in Charge (SAC) or his/her designee. The SAC or his/her designee must

Privacy Notice

- Authority: ATF derives its authority to collect this information from 28 USC § 599A, Bureau of Alcohol, Tobacco, Firearms, and Explosives and 28 CFR § 0.130, General functions.
- 2. Purpose: ATF will use this information to determine the eligibility and suitability of the individual to continue to be a confidential informant.
- 3. **Routine Uses:** The information will be used by ATF personnel for the purposes stated above. The information becomes a part of the confidential informant record and is included in Criminal Investigation Report System-Justice/ATF-003 (68 FR 3553-5) and is subject to paragraphs A., C., E., F., and M. of the published routine uses of that system of records. ATF may disclose the information with other law enforcement or other government agencies, as necessary for criminal investigation and/or litigation purposes.
- 4. **Disclosure:** Furnishing this information is voluntary; however, failure to furnish the requested information will prevent the retention of a confidential informant relationship with the ATF.