Facility Access Media (FAM) Request (Subtitle Part 1 - Authorizing Official Initiate PIV/Access Request)

* Indicates required question			
1.	Email *		

Privacy Act Statement

In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information is authorized by 44.U.S.C. 2104. Disclosure of the information is voluntary. The information provided will be used to prepare and issue an identification card or pass. Additionally, the information may be provided to an expert, consultant, or contractor of NARA to assist NARA in the performance of its duties. If some or any of the information is not provided by the candidate, the effect will be that the Facility Access Media may not be issued, resulting in the candidate being denied access to NARA facilities and IT systems.

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You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Public burden reporting for this collection of information is estimated to be 3 minutes per response. Send comments regarding the burden statement or any other aspect of the collection of information, including suggestions for reducing this burden to the National Archives and Records Administration (MP), 8601 Adelphi Road, College Park, MD 20740-6001. DO NOT SEND COMPLETED FORMS TO THIS ADDRESS.

NA Form 6006 (10-23) Required by NARA 275

OMB Control No. 3095-0057, Expiration date: XX/XX/20XX

Request Details

2.	Supervisor/Hiring Manager Phone Number	
Ur	ntitled Section	
3.	Candidate's Legal First Name *	
4.	Candidate's Middle Name (No initials) *	
5.	Candidate's Legal Last Name *	
6.	Candidate's email address *	
7.	Is this request for a new or replacement F Mark only one oval. New Skip to question 9 Replacement	YIV? *

Replacement Reason

8.	What is the reason for the replacement? *
	Mark only one oval.
	Damaged
	Lost
	Expired
	Other:
N	ARA Employee
9.	Is the candidate a NARA employee? *
	Mark only one oval.
	Yes
	No Skip to question 11
Te	erm Employee
10.	Is the candidate a term employee? *
	Mark only one oval.
	Yes
	No
Ca	andidate Information
Th	nis section applies to all employees including contractors.

11. Candidate's NARA Office Code *

Mark only one oval.			
A			
AC			
ACO			
AC01			
AC02			
ACOS			
ACP			
ACPP			
ACPS			
ACR			
ACR1			
ACR2			
ACR3			
ACR4			
ACRC			
ACRS			
ACT			
ACT1			
AF			
AFC			
AFN			
AFN-C			
AFN-CO			
AFN-CR			
AFN-M			
AFN-MC1			
AFN-MC2			
AFN-MC3			
AFN-MC4			

AFN-MC5

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	AFOE-KR
	AFOE-PA
	AFOE-PF
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	AFOR
	AFOR-R
	AFOR-S
	AFOT
	AFOW
	AFOW-DV
	AFOW-KC
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	AFOW-LX
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Facility Access Media (FAM) Request (Subtitle Part 1 - Authorizing Official

12.	Is the candidate's duty station their home?
	Mark only one oval.
	Yes, the candidate is remote.
	No, the candidate's duty location is at a facility.
13.	Candidate's Duty Location (Facility Name or Remote and the address of the *
	facility or office)
14.	Candidate's Duty Zip Code *
15.	Candidate's Position/Title *
4.0	
16.	If a NARA Contractor, is the employee on a Classified Contract? *
	Mark only one oval.
	Yes No Skip to question 19
	No Skip to question 19 Not a contractor Skip to question 19
	110t a contractor — chip to question 15
Cla	assified Contract Information
Thi	s section applies to CONTRACTORS ONLY .
17.	NARA Classified Contract Number *

18.	Clearance Level Required *
Αg	gency Role
19.	Candidate agency role (check all that apply) *
	Check all that apply.
	Not applicable
	Building manager
	OIG special agent
	Public affairs official
	Safety official
	Security official
	Federal emergency response official
	Other:
20.	Candidate access. Explain required access areas needed (e.g, offices, stacks, * labs, etc.)
21.	Does the candidate require 24-hour building access? This requires approval by the facility designated official.
	Mark only one oval.
	Yes
	No Skip to question 23

24 Hour Access - Designated Official Approval

22.	Please upload a PDF of the approval email from the facility designated official approving 24-hour access for this employee.	*
	Files submitted:	
Ca	ndidate Affiliation	
23.	Candidate affiliation (check all that apply) *	
	Check all that apply.	
	Federal Employee	
	Foreign National	
	Contractor	
	Volunteer	
	Foundation Employee	
	Intern Other Agency Employee	
24.	To what agency or organization does the candidate belong? (Federal agency or, if contractor, firm's name)	*
PΙ\	/ Sponsor Location	

25. If the candidate is within 50 miles of a NARA facility, please select the facility below.

Mark only one oval. Candidate is REMOTE and not within 50 miles of a NARA facility. College Park, MD Skip to question 29 Washington, DC Skip to question 29 Philadelphia, PA Skip to question 29 St Louis, MO Skip to question 29 Atlanta, GA Skip to question 29 Chicago, IL Skip to question 29 Seattle, WA Skip to question 29 Little Rock, AR Skip to question 29 New York, NY Skip to question 29 Waltham, MA Skip to question 29 Centerville, OH Skip to question 29 Moraine, OH Skip to question 29 Dayton, OH Skip to question 29 Riverside, CA Skip to question 29 San Bruno, CA Skip to question 29 Yorba Linda, CA Skip to question 29 West Branch, IA Skip to question 29 Abilene, KS Skip to question 29 Kansas City, MO Skip to question 29 Lenexa, KS Skip to question 29 Lees Summit, MO Skip to question 29 Grand Rapids, MI Skip to question 29 Keyser, WV Skip to question 29 Simi Valley, CA Skip to question 29

If the candidate is not within 50 miles of a NARA facility (REMOTE EMPLOYEES ONLY), where will the candidate go for their id card appointment?

- 1. Navigate to https://fedidcard.gov in a new window.
- 2. Select the link to Find a credential center.
- 3. Change the Activity filter dropdown to **Enrollment/Activation**.
- 4. Change the State or territory dropdown to the candidate's **home state** and select the **Filter button**.
- 5. In the filtered list, find a facility near the candidate with a **Center type of Shared**.
- 6. Copy and paste the Agency, Address, and Special Instructions below.

26.	Enrollment/Activation: Agency	
27.	Enrollment/Activation: Address	
28.	Enrollment/Activation: Special Instructions	
On	Final Submission Once you submit, this information will be accessible to the Personnel Security Office Physical Security Office.	ce and the
29.	Is there anything else we need to know to process this request?	

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