OMB NO. 0702-0135 OMB approval expires DEC 31. 2025

## TASS REQUEST FORM

**Trusted Associate Sponsorship System (formerly CVS Contract Verification System)** *This form must be submitted to Exchange EG-FP by the Exchange Contracting Officer only.* 

## **AGENCY DISCLOSURE NOTICE**

The public reporting burden for this collection of information, 0702-0135, is estimated to average 30 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.mbx.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.

## **PRIVACY ACT STATEMENT**

**AUTHORITY:** 10 U.S.C. §7103, "Secretary of the Army"; 10 U.S.C. §9013, "Secretary of the Air Force;" United States Presidential Executive Order (E.O.) 13526, "Classified National Security;" E.O. 10450, "Security Requirements for Government Employment;" Department of Defense Instruction (DoDI) 5200.01, "DoD Information Security Program and Protection of Sensitive Compartmental Information;" DoDI 5200.02, "DoD Personnel Security Program (PSP);" Army Regulation (AR) 380-67, "Personnel Security Program;" Air Force Instruction (AFI) 31-501, "Personnel Security Program Management;" AFI 31-401, "Information Security Program Management;" AR 215-8/AFI 34-211(i), "Army and Air Force Exchange Service Operations;" and E.O. 9397, (SSN), as amended.

**PRINCIPAL PURPOSES:** To assist in the processing of personnel security cleannce actions; to record security clearances issued or denied, and to verify for access to classified information or assignment to sensitive positions. ROUTINE USES: Records may be disclosed outside of DoD pursuant to Title 5 U.S.C. § 552a(b)(3) regarding DoD "Blanket Routine Uses" published at http://dpcld.defense.gov/Privacy/SORNsIndex/BlanketRoutineUses.aspx. Information may be released to Federal, State, Local, and Foreign Law Enforcement, Intelligence, or Security agencies in connection with a lawful investigation under their jurisdiction.

**DISCLOSURE:** Voluntary, however, failure to provide information may result in denial of a Common Access Card, non-enrollment in the Defense Enrollment Eligibility Reporting System (DEERS); refusal to grant access to DoD installations, buildings, facilities, computer systems and networks; and denial of DoD benefits if otherwise authorized.

A copy of the **Privacy Impact Assessment (PIA)** for the collection of information may be located at https://www.aafes.com/about-exchange/public-affairs/FOIA/assessments.htm.

**SYSTEM OF RECORDS NOTICE (SORN):** 1703.03, "Personnel Security Clearance Case Files;" https://dpcld.defense.gov/Privacy/SORNsIndex/DOD-Component-Notices/Army-Article-List/

## TASS REQUEST FORM

Trusted Associate Sponsorship System (formerly CVS Contract Verification System)

#### **INSTRUCTIONS**

Information collected on this form is used by AAFES Force Protection to input in the Trusted Associate Sponsorship System (TASS) to initiate requests for Common Access Cards (CAC) for contractors. Please follow the instructions listed below when completing this form.

- 1. Please read the Agency Disclosure Notice and Privacy Act Statement on Page One prior to completing the document.
- 2. Please place the date of your request in the space at the top right of the form on the next page in the space provided and enter the date as **DD MM YYYY**.
- 3. Please provide all personal information requested in **Section I** of the form. The applicant should complete this section.
- 4. **Section II** of this form is to be completed by the Contracting Official (CO) or an AAFES Service Business Manager (SBM). All required documents are to be attached to this form when submitted to Force Protection; otherwise, the request for a CAC will be denied.
- 5. Please do not enter any information in **Section III**. Your AAFES Contract Official or AAFES Service Business Manager will complete this section.
- 6. Please do not enter any information in **Section IV**. AAFES Force Protection completes this section of the form.
- 7. Once you have completed **Section I** of this form, you will need to attach a current national background check, completed Optional Form 306 (OF306, *Declaration of Federal Employment*), and have had your fingerprints taken on a FD 258 or SF87 fingerprint card (which has the appropriate signatures and your demographics). Next, you will need to submit all of your documents to your AAFES Contract Official or Service Business Manager in person or by a traceable mailing method (i.e. Federal Express).
- 8. All of your documents will be reviewed by your AAFES Contract Official and/or AAFES Service Business Manager for completeness and delivered in person to AAFES Force Protection to process your request for a Common Access Card (CAC). Your AAFES Contract Official and/or AAFES Service Business Manager will inform you of the results and provide additional direction on where and how to obtain your CAC.
- 9. Once your AAFES contract obligations are completed, you are required to return your Common Access Card (CAC) to your AAFES Contract Official or AAFES Service Business Manager for outsourcing.

# TASS REQUEST FORM

Trusted Associate Sponsorship System (formerly CVS Contract Verification System)
This form must be submitted to AAFES Force Protection through your AAFES Contracting Officer only.

Information collected on this form will be used by AAFES Force Protection for input into the Trusted Associate Sponsorship System (TASS) owned and controlled by the Defense Manpower Data Center (DMDC) allowing sponsorship in the Defense Enrollment and Eligibility Reporting System (DEERS).

Please Read Pages One and Tv			e of Request: (ex: 2		r com go your (D.	
l. ,	APPLICANT'S IN	FORMATION* (to	o be complete	d by Applicar	nt)	
(Full Name) Last:	First:	•	Middle:		Sex: Ma	ale 🔲
Detect District (annual part)	Cocial Cocumity # /		Disas of Distley		Fema	ıle
Date of Birth: (DD/MMM/YYYY)	Social Security # (or	FIN - Foreign Information #):	Place of Birth: (0	City, State) or (City, Cou	untry, overseas only)	
Email Address:			Phone #:			
Have you had previous Military If so, please provide the Military				r Contractor withi	n the last 24 mor	ıths?
Choose One:		g <b>,</b>		(Military Branch/l	Federal Entity)	
☐ No ☐ Yes From:	To: (Month/Year)					
II. REQUIRED DOCUME	ENT* (to be comp	oleted by the Co	ntract Officer o	or the Service	e Business M	lanageı
Арр	licant must attach one	of the following docu	ments with this forr	n (select docume	ent)	
	<u> </u>	of Authorization)	LOI (Letter	<u> </u>		
	These items are re	equired only if a currer	nt investigation is ne	eeded.		
Fingerprints	Nation	al Background Check	OF.	306 (Declaration	n of Federal Emp	loyment)
	BE COMPLETE		NTRACTING C		LY*	
Exchange POC Name		Phone #		Facility #		
Contractor's POC Name		Phone #		Email Address		
Contractor's Company Name			Company Address			
Contract #:			Contract End Date: (DD/MMM/YYYY)			
Comments:						
	BE COMPLETE	D BY AAFES FO	RCE PROTEC	TION ONLY*		
In Process						
JPAS Date Updated:			Investigation Type: (Example T1, T2, etc.)			
e-QIP Date Initiated	:		TASS TA:			
	∟ e-QIP OF	PM Submission Date				
Out Process						
☐ JPAS Date Updated	d:		TASS TA:			
Comments:						

<sup>\*(</sup>Application will not be processed without the required documents.)