



FOR OFFICIAL USE ONLY
 DEPARTMENT OF THE AIR FORCE
 158TH FIGHTER WING (ACC)
 SOUTH BURLINGTON VERMONT

SFS OFFICE USE ONLY
 DATE REQUEST RECEIVED
 ___/___/___

TOUR DATE: ___/___/___

**158th Security Forces Squadron
 BASE ACCESS REGISTRATION / RECORD CHECK / DAY PASS FOR PUBLIC AFFAIRS TOUR ONLY**

**Defense Biometric Identification System (DBIDS)
 PRIVACY ACT STATEMENT**

In accordance with the Privacy Act of 1974 (Public Law 93-579), this notice informs you of the purpose of the information collected and how it will be used. Please read it carefully.

AUTHORITY: 10 U.S.C. 113, Secretary of Defense, Pub. L. 106-65 (Use of Smart Card Technology in the Department of Defense); 10 U.S.C. 136; DoD Directive 1000.25, DoD Personnel Identity Protection (PIP) Program, July 19, 2004; 44 U.S.C. Chap. 35, Government Information Security Act; E.O. 12958, Classified National Security Information as amended by E.O., 13142 and 13292; and E.O. 9397 (SSN).

PURPOSE(S): Information in this system will be used by Commanders of DoD installations to determine if an individual meets access control requirements to make positive identification of an individual and to monitor any authorized access to DoD installations and/or facilities.

ROUTINE USE(S): Any release of information contained in this system of records outside of DoD will be compatible with the purposes for which the information is being collected and maintained. The DoD "Blanket Routine Uses" set forth at the beginning of the Office of the Secretary of Defense's (OSD) compilation of systems of records notices apply to this collection.

DISCLOSURE: Voluntary. However, failure to provide the requested information may result in denial of DBIDS card or visitors pass and denial of entry to DoD Installations and/or Facilities.

***PRINT CLEARLY AND LEGIBLY FOR TIMELY PROCESSING.
 ENSURE ALL INFORMATION IS COMPLETED.***

PERSONAL INFORMATION

Last Name	First Name	Middle Name	Jr., Sr, I, II, III, IV	Gender
Date of Birth (MM-DD-YYYY) ___/___/___	Driver's-Non-Driver's License No. or ID #	Driver's License State of Issue	U.S. Citizen?	Yes ___ No ___

BACKGROUND CHECK AUTHORIZATION

In connection with my application to provide services to the Vermont Air National Guard (VTANG), I understand that background investigation checks including, but not limited to, criminal convictions, motor vehicle and other reports will be conducted on myself. Further, I understand that 158th Security Forces Squadron will request information from Federal, State and other agencies that maintain records concerning past activities related to driving, criminal or civil claims.

I authorize, without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for this purpose. This authorization and consent shall be valid in original or electronic form. Results cannot be shared with you. If you would like to obtain your own: Police Reports and Public Records Ordering go to the Department of Public Safety Website (<https://secure.vermont.gov/DPS/publicrecords/>).

Signature	Date (MM-DD-YYYY)
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The information herein is For Official Use Only (FOUO) which must be protected under the Freedom of Information Act of 1966 and Privacy Act of 1974, as amended. Unauthorized disclosure or misuse of this PERSONAL INFORMATION may result in criminal and/or civil penalties.