

# ATL Security FBI Fingerprint Background Check Application



**THIS FORM MUST BE TYPED. PLEASE DO NOT BEND OR FOLD.**

**SECTION 1 - BIOGRAPHIC INFORMATION** Complete all applicable sections. Incomplete forms will be rejected.

Last Name		First Name		Middle Name	
Other Names Used (Include <b>ALL</b> Previous Names including Maiden, Nicknames or Aliases)					
Alias Last Name		Alias First Name		Alias Middle Name	
Alias Last Name		Alias First Name		Alias Middle Name	
Alias Last Name		Alias First Name		Alias Middle Name	
Eye Color	Hair Color	Height	Weight	Gender	Race
Citizenship Information					
City/State/Province of Birth		Country of Citizenship		Date of Birth	Social Security Number
Current Residence					
Mailing Address (P.O. Box not accepted)			City	State	Zip Code
Country of Residence		Phone Number			
U.S. Citizen Born Abroad			Not a U.S. Citizen		
Passport Number			Non-Immigrant Visa Control Number		
Passport Country			I-94 Arrival/Departure Record Number		
Birth Abroad Certificate <input type="checkbox"/> DS-1350 <input type="checkbox"/> FS-240 <input type="checkbox"/> FS-545			Alien Registration Number <b>A</b>		

**SECTION 2 - AUTHORIZED SIGNATORY INFORMATION** FOR AUTHORIZED SIGNATORY USE ONLY. DO NOT WRITE BELOW THIS LINE.

<p><b>Application Purpose</b></p> <input type="checkbox"/> New <input type="checkbox"/> Upgrade <input type="checkbox"/> Renewal <input type="checkbox"/> Customs Seal	<p><b>Access Type</b></p> <input type="checkbox"/> SIDA Ramp Access Sterile Area <input type="checkbox"/> Non-SIDA Sterile Area Only <input type="checkbox"/> Public	<p>Company Name</p> <hr/> <p>Primary Duty Location</p>
---	--	--

**SECTION 3 - FOR OFFICE USE ONLY** DO NOT WRITE BELOW THIS LINE.

Fingerprint Date	Staff	Receipt Number
<p>Identification Presented</p> <input type="checkbox"/> Driver's License/State ID <input type="checkbox"/> Military ID <input type="checkbox"/> Passport <input type="checkbox"/> DS-1350/FS-545/FS-240	<input type="checkbox"/> Birth Certificate <input type="checkbox"/> SSN Card <input type="checkbox"/> Permanent Resident Card <input type="checkbox"/> Other	
Check	M/O	Credit

DISCLOSURE

I understand that the City of Atlanta, Department of Aviation, and Airport Security Coordinator (ASC) will commence a FBI criminal history record check (CHRC) in accordance with Transportation Security Regulation, Part 1542.209 (Fingerprint-based Criminal History Records Checks).

I further understand that:

- 1. I may receive a copy of any criminal history record received from the FBI upon written request to the ASC.
2. Prior to making a final decision to deny authorization for unescorted access, the ASC will inform me that the FBI criminal history record check disclosed information that would disqualify me from unescorted access and the ASC will provide a copy of the record, if requested in writing.
3. I may contact the local jurisdiction responsible for the information and the FBI to complete or correct the information contained in the record before any final access decision is made, subject to the following conditions:
a. Within 30 days after being advised of disqualifying information, I must notify the ASC, in writing, of my intent to correct any information believed to be inaccurate.
b. Upon my notification that a record has been corrected, the ASC must obtain a copy, or accept a copy from me, of the revised FBI record or a certified true copy of the information from the appropriate court, at no expense to the City of Atlanta, prior to making a final decision on access status.
c. I will be notified that a final decision has been made to grant or deny authorization for unescorted access.
4. Criminal history record information provided by the FBI will be used solely for the purposes of access investigation, and no person shall disseminate the results of a criminal history record check to anyone other than authorized representatives, the ASC and myself.
5. The ASC will maintain a written record of the FBI criminal history record check until 180 days after the termination of my authorization for unescorted access.
6. I must disclose to the Airport Security Coordinator within twenty-four (24) hours if I am convicted of any disqualifying criminal offense that occurs while I have unescorted access to any secured area of ATL Airport.

INITIALS X

DISQUALIFYING CRIMINAL OFFENSES

Have you been convicted or found not guilty by reason of insanity of any of the disqualifying crimes listed below during the previous ten years?

You must check the "YES" box for each disqualifying offense. If you answer "YES" to any of the following, you may be ineligible to pass the Criminal History Records Check and will be required to provide additional information for further processing of your application. Additionally, you may be disqualified for any other crime classified as a felony that the TSA Administrator determines indicates a propensity for placing contraband aboard an aircraft in return for money.

- 1. Forgery of certificates, false marking of aircraft, and other aircraft registration violation (49 U.S.C. 46306)
2. Interference with air navigation (49 U.S.C. 46308)
3. Improper transportation of a hazardous material (49 U.S.C. 46312)
4. Aircraft piracy (49 U.S.C. 46502)
5. Interference with flight crewmembers or flight attendants (49 U.S.C. 46504)
6. Commission of certain crimes aboard aircraft in flight (49 U.S.C. 46506)
7. Carrying a weapon or explosive aboard aircraft (49 U.S.C. 46505)
8. Conveying false information and threats (49 U.S.C. 46507)
9. Aircraft piracy outside the special aircraft jurisdiction of the United States (49 U.S.C. 46502(b))
10. Lighting violations involving transporting controlled substances (49 U.S.C. 46315)
11. Unlawful entry into an aircraft or airport area that serves air carriers or foreign air carriers contrary to established security requirements (49 U.S.C. 46314)
12. Destruction of an aircraft or aircraft facility (18 U.S.C. 32)
13. Murder
14. Assault with intent to murder
15. Espionage
16. Sedition
17. Kidnapping or hostage taking
18. Treason
19. Rape or aggravated sexual abuse
20. Unlawful possession, use, sale, distribution, or manufacture of an explosive or weapon
21. Misdemeanor and felony weapon convictions
22. Armed or felony unarmed robbery
23. Extortion
24. Distribution of, or intent to distribute, a controlled substance
25. Felony arson
26. Felony involving a threat
27. Felony involving-
i. Willful destruction of property;
ii. Importation or manufacture of a controlled substance;
iii. Burglary;
iv. Theft;
v. Dishonesty, fraud, or misrepresentation;
vi. Possession or distribution of stolen property;
vii. Aggravated assault;
viii. Bribery;
ix. Illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than 1 year.
28. Violence at international airports (18 U.S.C. 37)
29. Conspiracy or attempt to commit any of the criminal acts listed above

INITIALS X

PRIVACY ACT NOTICE

**Authority:** 6 U.S.C. § 1140, 46 U.S.C. § 70105; 49 U.S.C. §§ 106, 114, 5103a, 40103(b)(3), 40113, 44903, 44935-44936, 44939, and 46105; the Implementing Recommendations of the 9/11 Commission Act of 2007, § 1520 (121 Stat. 444, Public Law 110-53, August 3, 2007); FAA Reauthorization Act of 2018, §1934(c) (132 Stat. 3186, Public Law 115-254, Oct 5, 2018), and Executive Order 9397 (November 22, 1943), as amended.

**Purpose:** The Department of Homeland Security (DHS) will use the information to conduct a security threat assessment. If applicable, your fingerprints and associated information will be provided to the Federal Bureau of Investigation (FBI) for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems including civil, criminal, and latent fingerprint repositories. The FBI may retain your fingerprints and associated information in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI. DHS will also transmit your fingerprints for enrollment into US-VISIT Automated Biometrics Identification System (IDENT).

DHS will also maintain a national, centralized revocation database of individuals who have had airport - or aircraft operator- issued identification media revoked for noncompliance with aviation security requirements. DHS has established a process to allow an individual whose name is mistakenly entered into the database to correct the record and have the individual's name expunged from the database. If an individual who is listed in the centralized database wishes to pursue expungement due to mistaken identity, the individual must send an email to TSA at Aviation.workers@tsa.dhs.gov.

**Routine Uses:** In addition to those disclosures generally permitted under 5 U.S.C. § 522a(b) of the Privacy Act, all or a portion of the records or information contained in this system may be disclosed outside DHS as a routine use pursuant to 5 U.S.C. § 522a(b)(3) including with third parties during the course of a security threat assessment, employment investigation, or adjudication of a waiver or appeal request to the extent necessary to obtain information pertinent to the assessment, investigation, or adjudication of your application or in accordance with the routine uses identified in the TSA system of records notice (SORN) DHS/TSA 002, Transportation Security Threat Assessment System. For as long as your fingerprints and associated information are retained in NGI, your information may be disclosed pursuant to your consent or without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses.

**Disclosure:** Pursuant to § 1934(c) of the FAA Reauthorization Act of 2018, TSA is required to collect your SSN on applications for Secure Identification Display Area (SIDA) credentials. For SIDA applications, failure to provide this information may result in denial of a credential. For other aviation credentials, although furnishing your SSN is voluntary, if you do not provide the information requested, DHS may be unable to complete your security threat assessment.

**INITIALS**           X          

EMPLOYEE CERTIFICATION STATEMENT

The information I have provided is true, complete, and correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement can be punished by fine or imprisonment or both (see Section 1001 of the Title 18 of the United States Code).

I authorize the Social Security Administration to release my Social Security Number (SSN) and full name to the Transportation Security Administration, Enrollments Services and Vetting Programs, Attention: Vetting Programs (TSA-10)/Aviation Worker Program, 6595 Springfield Center Drive, Springfield, VA 20598-6010.

I am the individual to whom the information applies and want this information released to verify that my SSN is correct. I know that if I make any representation that I know is false to obtain information from social security records, I could be punished by a fine, imprisonment or both.

EMPLOYEE SIGNATURE	DATE
EMPLOYEE NAME	SOCIAL SECURITY NUMBER