| <ul> <li>New</li> <li>Renewal</li> <li>Add/Remove Company</li> <li>Other:</li> <li>Name Change: Previous Name</li> </ul>  |                                |                   |        |                   | MSP AIRPORT SECURITY BADGE APPLICATION  Applicant ID#(office use only)  ne: |   |   |  |  |  |  |   |  |  |  |  |                                       |   |  |   |  |                       |            |  |
|---|--------------------------------|-------------------|--------|-------------------|---|---|---|--|--|--|--|---|--|--|--|--|---------------------------------------|---|--|---|--|-----------------------|------------|--|
|   |                                |                   |        |                   |   |   |   |  |  |  |  |   |  |  |  |  |                                       |   | REVI   | SED   | APRI   | L 2025                |            |  |
| Two (2) IDs from the 'MSP Airport Badge Identification The requested information and your fingerprints are being collected to determine. The information will be used to determine if you have any convitive you pose a security risk to aviation transportation. Providing this information Security Badge. In providing all requested information and fingerprints, you various law enforcement and intelligence agencies including the Minnesota record and intelligence database reviews. This data will also be available to |                                |                   |        |                   |   |   | determin<br>conviction<br>nation is<br>you may<br>esota Bu  | ne your ons or po<br>volunta<br>be abloreau of             | ability<br>ending<br>ry. Ho<br>e to re<br>Crimir | to obtain<br>charge<br>wever,<br>ceive of<br>nal App | in and les for a failure failure from the failure from th | have a<br>crime<br>to prov<br>a MSF<br>ion, FE        | MAC-I<br>which wide required<br>Securi<br>SI, Dept | ssued lovill disquested it<br>yill disquested it<br>y Badg<br>of Hor | dentificualify ynforma<br>nforma<br>e. Und<br>neland | cation Bayou under<br>ation may<br>der feder | adge (<br>er 49 C<br>y dela<br>al and | MSP Securi<br>FR §1542.2<br>y or prevent<br>I state laws, | ity Badge<br>209 or M<br>the issu<br>this info | e or Badge<br>AC Ordina<br>ance or re<br>ermation w | e) for work a<br>ance No. 117<br>etention of a<br>rill be shared | 7; or,<br>MSP<br>with |            |  |
| APP   | LICA                           | NT I              | NFO    | RM <i>A</i>       | ATIC  | ON  |   |  |  |  |  | F   | <b>PLE</b>   | ASI  | E PR   | RINT   | LE                                    | EGIB  | LY   | (illegible  | apps v   | vill be de            | enied)     |  |
| LAST  | NAME                           |                   |        |                   |   |   |   |  | FIRS   | T NAN  | ΙE   |   |  |  |  |  |                                       | MIE   | DDLE   | NAME  |  |                       |            |  |
|   |                                |                   |        |                   |   |   |   | Ī  |  |  |  |   |  |  |  |  |                                       |   |  |   |  |                       |            |  |
| НОМЕ  | ADDR                           | ESS               |        |                   |   |   |   |  | APT :  | #  |  | CIT   | Y  |  |  |  |                                       |   |  | STATE   |  | Z                     | ZIP CODE   |  |
|   |                                |                   |        |                   |   |   |   |  |  |  |  |   |  |  |  |  |                                       |   |  |   |  |                       |            |  |
| HOME  | PHON                           | E NUME            | BER    |                   |   |   |   |  | WOR  | K PHO  | ONE  | NUME  | ER   |  |  |  |                                       | CEL   | L P  | HONE NU   | MBER   |                       |            |  |
|   |                                |                   |        |                   |   |   |   |  |  |  |  |   |  |  |  |  |                                       |   |  |   |  |                       |            |  |
| SOCIA   | L SEC                          | URITY N           | IUMBE  | R                 |   |   |   |  |  |  | BIF  | RTHD  | ATE (  | MM/E   | DD/YY  | YY)  |                                       |   |  | ARE   | YOU  | A US CI               | TIZEN      |  |
|   |                                | -                 |        | -                 |   |   |   |  |  |  | -  |   |  | -  |  |  |                                       |   |  | YES(  | $\overline{)}$   | NO (                  | $\bigcirc$ |  |
| APPL  | ICAN                           | T EMAI            | L ADE  | DRESS             | 1 <u> </u>  |   |   |  |  |  |  | <u> </u>  |  |  |  |  |                                       |   |  |   |  |                       |            |  |
|   |                                |                   |        |                   |   |   |   |  |  |  |  |   |  |  |  |  |                                       |   |  |   |  |                       |            |  |
| OTHE  |                                | MES USI<br>S LAST | ED (Ma | iden, F           | Previo  | ous Ma  | rried   | Nam  | ne, Alia   | ases, (  | etc.)  | please list below ALIAS FIRST ALIAS MIDDLE            |  |  |  |  |                                       |   |  |   |  |                       |            |  |
| 1   |                                |                   |        |                   |   |   |   |  |  | , and the same same same same same same same sam     |  |   |  |  |  |  |                                       |   |  |   |  |                       |            |  |
| 2   | ALIA                           | S <b>LAST</b>     |        |                   |   |   |   |  |  | ALIAS <b>FIRST</b>                                   |  |   |  |  |  | ALIAS <b>MIDDLE</b>                          |                                       |   |  |   |  |                       |            |  |
|   | ALIA                           | s <b>LAST</b>     |        |                   |   |   |   |  | ALIA   |  |  | ALIAS <b>FIRST</b>                                    |  |  |  |  |                                       | ALIAS MIDDLE  |  |   |  |                       |            |  |
| 3   |                                |                   |        |                   |   |   |   | _  |  |  |  |   |  |  |  |  |                                       | - 00  | COLOR  |   |  |                       |            |  |
|   | Mala                           | SEX               |        | F                 |   | IGHT<br>INCHE   | S   |  | POU  | MDS  |  |   |  |  |  |  |                                       | E CC  | COLOR  |   |  |                       |            |  |
|   | Male<br>_                      | . –               | _      |                   |   |   |   |  | ☐ Black ☐ Blue ☐ Brow                            |  |  |   |  |  | Brow   | _ <i>,</i>                                   |                                       |   |  |   |  |                       |            |  |
|   |                                |                   |        | HAIF              |   |   |   |  | _  |  |  | RACE  |  |  |  |  |                                       |   |  |   |  |                       |            |  |
|   |                                | ☐ Blad            |        | ] Blond<br>] Sand |   | ☐ Bro<br>☐ Wh   |   |  | Gray<br>None                                     |  |  | ☐ American Indian ☐ Asian ☐ Black ☐ White or Hispanic |  |  |  |  |                                       |   |  |   |  |                       |            |  |
| U.S. C  | ITIZEN                         | IS, COM           |        |                   |   |   |   |  | . 13110  |  |  | NON- U.S. CITIZENS, COMPLETE THIS SECTION             |  |  |  |  |                                       |   |  |   |  |                       |            |  |
| U.S. C  | ITY O                          | BIRTH             | :      |                   |   |   |   |  |  |  |  | COUNTRY OF BIRTH:                                     |  |  |  |  |                                       |   |  |   |  |                       |            |  |
|   |                                | OF BIRT           |        | 0000              | DD -  | 4.0   |   |  |  | .1.  | _  | COUNTRY OF CITIZENSHIP:                               |  |  |  |  |                                       |   |  |   |  |                       |            |  |
| If you are a <b>U.S. CITIZEN BORN ABROAD</b> , you must also provide one (1) of the following documents:  |                                |                   |        |                   |   | If you are <b>NOT A U.S. CITIZEN</b> , check appropriate box: |   |  |  |  |  |   |  |  |  |  |                                       |   |  |   |  |                       |            |  |
| ☐ Certificate of Naturalization with social security card ☐ Certificate of Citizenship with social security card ☐ U.S. Passport  |                                |                   |        |                   |   |   | <ul> <li>☐ Permanent Resident Alien (Green Card Holder)</li> <li>☐ Registered Alien authorized to work until/_</li> <li>☐ Non-Immigrant VISA #</li> </ul> |  |  |  |  |   |  |  |  |  |                                       |   |  |   |  |                       |            |  |
| ☐ Certificate of Birth Abroad issued by Dept. of State  |                                |                   |        |                   |   |   |   | ENTER ALL 9 DIGITS OF ALIEN REGISTRATION # (if applicable) |  |  |  |   |  |  |  |  |                                       |   |  |   |  |                       |            |  |
| COUNTRY OF BIRTH:   |                                |                   |        |                   |   |   |   |  | Α.   |  |  |   |  |  | L  |  |                                       |   |  |   |  |                       |            |  |
| COMPANY NAME  |                                |                   |        |                   |   |   |   | DO   |  |  |  |   |  |  |  | E MSP S                                      | SECUI                                 | RITY B  | ADGE?  |   |  |                       |            |  |
|   |                                |                   |        |                   |   |   |   |  |  |  |  | YES   | , WIT  | 'H WH  | AT C   | OMP/   | ANY?_                                 |   |  |   |  |                       | _          |  |
|   | ·                              | O -               |        | O!                | 4   |   |   |  |  |  |  |   |  |  |  |  |                                       | D-1   |  |   |  |                       |            |  |
| Auti  | Authorized Signer's Signature: |                   |        |                   |   |   |   | Date:  |  |  |  |   |  |  |  |  |                                       |   |  |   |  |                       |            |  |

## Additional Applicant Agreements, Badge Holder Responsibilities, Privacy Act Notice & SSN Certification – Effective April 22, 2021

## Applicant - Please Read Carefully. Initial & Sign Where Indicated.

I understand and authorize my fingerprints to be taken and submitted to the FBI for fingerprint-based criminal history records checks (Background Checks). I understand that the FBI will retain my fingerprints. I authorize the FBI and the Airport Police Department to enter my fingerprints into FBI programs that continually analyze my fingerprints for matches to disqualifying crimes under 49 CFR §1542.209. In addition, I authorize the Airport Security Coordinator through the Airport Police Department to conduct a computerized criminal history record check upon my application or renewal for a MSP Security Badge. I understand that the results of the fingerprint or computerized criminal history check could result in a denial/revocation of my MSP Security Badge if either check reveals any

disqualifying criminal convictions under 49 CFR 1542.209, criminal convictions occurring on MSP Airport property, or pending court cases for a disqualifying criminal conviction. Applicant's initials I acknowledge that I have read, understand, and freely provide the information required on this application. I shall not provide false information or false documentation in an attempt to obtain a MAC-issued identification badge. I understand the consequences of providing incomplete, inaccurate, or false information. The information that 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 Title 18 of the United States Code and MAC Ordinance No. 117.) Applicant's initials **Badge Holder Responsibilities** I understand that my MSP Security Badge is the property of the Metropolitan Airports Commission (MAC) and must be surrendered upon demand, expiration, suspension or termination of contract or employment. I understand that I must notify the Badging Office within twenty-four (24) hours of a conviction of a Disqualifying Crime. I understand that I must not allow anyone else to use my MSP Security Badge. I will not alter my badge in any manner. I will not allow anyone to 'piggyback' behind me through a card access door. I will not leave my MSP Security Badge and/or airport-issued keys in an unattended vehicle. I will use my MSP Security Badge only in the performance of my official job duties. I will immediately report any security violations to the Airport Police Department. I will wear my MSP Security Badge on my outermost garment, prominently displayed above the waist, when in the Secured SIDA or AOA SIDA areas. I will challenge and report any individual who is not displaying a MSP Issued Security Badge inside the Secured SIDA and AOA SIDA areas. I will assure proper security and securing of all doors and gates. I will obey all lawful orders and directions from the Airport Police issued in the furtherance of the Airport program, TSA regulations or the Airport's security ordinance. I will contact the Badging Office IMMEDIATELY if my MSP Security Badge is lost or stolen and understand that I will need to pay the applicable badge fee and attend required training. I will notify the Badging Office of any name changes or address changes within 10 days. I will bring citizenship documentation to the Badging Office if/when I become a U.S. citizen. I understand that any keys I have been issued must be returned to MAC Facilities immediately upon termination. SCREENING NOTICE: Any employee holding a credential granting access to a Security Identification Area, to include Secured Identification Display Areas and Sterile Areas, may be screened at any time while gaining access to, working in, or leaving a Security Identification Area. I understand that all persons, vehicles and belongings entering an Airport Security Area are subject to inspection by designated MAC employees or TSA officials. USING YOUR MSP SECURITY BADGE TO BYPASS A TSA SCREENING CHECKPOINT TO CATCH A FLIGHT IS A VIOLATION - Everyone MUST go through a TSA passenger screening lane (NOT EMPLOYEE LANE) to board a flight with any accessible property they intend to carry onboard the aircraft AND must remain in the sterile area I have read and understand the above agreement and responsibilities and will abide by all airport rules and regulations. If I fail to comply with any of them, it may result in suspension or revocation of my MSP Security Badge or possible prosecution under federal, state and local laws. APPLICANT'S SIGNATURE X Date \_\_\_\_\_ Privacy Act Notice - Revised 2/10/2021 and Social Security Certification - READ AND SIGN 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. § 552a(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. § 552a(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 will 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. Social Security Certification: I authorize the Social Security Administration to release my Social Security Number 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 or imprisonment or both. Applicant's Signature X \_\_\_\_\_\_ Date of Birth \_\_\_\_\_ / Print FULL NAME

Date: \_\_\_\_\_

Authorized Signer's Signature: \_\_

## TSA & MAC Security Ordinance DISQUALIFYING CRIMES Questionnaires and Applicant Certification

Before you can be granted unescorted rights to the Security Identification Display Area (SIDA) or Sterile Area, you must provide one set of legible fingerprints, which are sent to the Federal Bureau of Investigation (FBI) for a criminal history records check (CHRC). You are not compelled to provide fingerprints. If you chose not to provide fingerprints, we cannot issue a badge to you. Please complete the questionnaires below.

## TSA CRIMINAL HISTORY QUESTIONNAIRE - 49 CFR 1542.209

Have you ever been convicted (under Federal Law "deferred adjudication" or similar outcome is considered a conviction), entered a plea of nolo contendere or been found not guilty by reason of insanity, of any of the crimes listed below in the last 10 years? Please check the appropriate box by each crime description. If you answered 'YES' to any of the crimes, do not proceed with fingerprinting. Consult with your authorized signer.

| List of Crimes   | YES | NO | List of Crimes  | YES | NO |
|--|-----|----|---|-----|----|
| Forgery of certificates, false marking of aircraft, and other aircraft   |     |    | Unlawful possession, use, sale, distribution, or manufacture of an  |     |    |
| registration violation (49 U.S.C. 46306)   |     |    | explosive or weapon.  |     |    |
| Interference with air navigation (49 U.S.C. 46308)   |     |    | Extortion   |     |    |
| Improper transportation of a hazardous material (49 U.S.C. 46312)  |     |    | Armed or felony unarmed robbery   |     |    |
| Aircraft piracy (49 U.S.C. 46502)  |     |    | Distribution of, or intent to distribute, a controlled substance  |     |    |
| Interference with flight crew members or flight attendants (49 U.S.C. 46504)   |     |    | Felony arson  |     |    |
| Commission of certain crimes aboard aircraft in flight (49 U.S.C. 46506)   |     |    | Felony involving a threat   |     |    |
| Carrying a weapon or explosive aboard aircraft (49 U.S.C. 46505)   |     |    | Felony involving:   | YES | NO |
| Conveying false information and threats (49 U.S.C. 46507)  |     |    | Willful destruction of property   |     |    |
| Aircraft piracy outside the special aircraft jurisdiction of the United States (49 U.S.C. 46502(b))  |     |    | Importation or manufacture of a controlled substance  |     |    |
| Lighting violations involving transporting controlled substances (49 U.S.C. 46315)   |     |    | Burglary  |     |    |
| 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) |     |    | Theft   |     |    |
| Destruction of an aircraft or aircraft facility (18 U.S.C. 32)   |     |    | Dishonesty, fraud or misrepresentation  |     |    |
| Murder   |     |    | Possession or distribution of stolen property   |     |    |
| Assault with intent to murder  |     |    | Aggravated Assault  |     |    |
| Espionage  |     |    | Bribery; or   |     |    |
| Sedition   |     |    | Illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than one (1) year |     |    |
| Kidnapping or hostage taking   |     |    | Violence at international airports (18 U.S.C. 37)   |     |    |
| Treason  |     |    | Conspiracy or attempt to commit any of the aforementioned criminal  |     |    |
| Rape or aggravated sexual abuse  |     |    | acts  |     |    |

| Conveying false information and threats (49 U.S.C. 46507)   | Willful destruction of property  |   |
|---|--|---|
| Aircraft piracy outside the special aircraft jurisdiction of the United States (49 U.S.C. 46502(b))   | Importation or manufacture of a controlled substance   |   |
| Lighting violations involving transporting controlled substances (49 U.S.C. 46315)  | Burglary   |   |
| 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)  | Theft  |   |
| Destruction of an aircraft or aircraft facility (18 U.S.C. 32)  | Dishonesty, fraud or misrepresentation   |   |
| Murder  | Possession or distribution of stolen property  |   |
| Assault with intent to murder   | Aggravated Assault   |   |
| Espionage   | Bribery; or  |   |
| Sedition  | Illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than one (1) year  |   |
| Kidnapping or hostage taking  | Violence at international airports (18 U.S.C. 37)  |   |
| Treason   | Conspiracy or attempt to commit any of the aforementioned criminal acts  |   |
| Rape or aggravated sexual abuse   | RITY ORDINANCE 117 QUESTIONNAIRE   |   |
| release from imprisonment for a Disqualifying Crime.  Have you been arrested and convicted of a non-disqualifying crime comm  YES NO MAC Ord. 117, 3.8 d. The Airport Security Coordinator or designee in   | alifying Crime shall be ineligible to apply for a MSP Security Badge for at least 12 months from the nitted on MSP Airport property?  may deny issuance of a MSP Security Badge based on an applicant's conviction for a non-disc  | qualifying crime  |
| operations. Maximum period of denial under this provision shall be (1) for a misdemeano conviction date; or (3) for a felony conviction, ten years from conviction date.  | ened the property, safety, comfort efficiency or security of passengers, employees, tenants or A<br>or conviction, one year from the conviction date; (2) for a gross misdemeanor conviction, three<br>LICANT CERTIFICATION  |   |
| By signing below, I am certifying that, within the past 10 years, I have no crimes listed above, nor am I awaiting judicial (court) proceedings, not questionnaire. I am also certifying the information provided above is true faith. I understand that a knowing and willful false statement on this appunited States Code.) NOTE: Federal regulations under 49 CFR 1542 Coordinator within 24 hours of any conviction of any disqualifying criming demand.  If the criminal history check reveals a conviction of one or more of the contified of your appeal rights at that time. In the event the TSA determines | ot been convicted or found not guilty by reason of insanity of any of the TSA or have I answered 'Yes' to any of the questions on the MAC Security On the complete, and correct to the best of my knowledge and belief and is proposed in the punished by fine or imprisonment or both. (See Section 10 2.209(I) imposes a continuing obligation for badge holders to notify the Air ne or any pending judicial proceedings. MSP Security Badge must be surred disqualifying crimes in the past 10 years, you will not be granted approval aranines that you do not meet the STA eligibility requirements, you will be con | rdinance 11<br>vided in god<br>01 of Title 1<br>port Securii<br>ndered upo<br>nd you will b<br>tacted by th |
| contained in your criminal history record, you have 30-days to notify the   | v you may appeal the determination. If there is any discrepancy or incorrect<br>e MSP Airport Security Coordinator in writing of your intent to have the reco  | rd corrected  |

е ıe n record, you must contact the law enforcement agency that provided the information. You may receive a copy of your criminal history record by sending a request in writing to: Security Coordinator, Airport Police, LT-3255, MSP Int'l Airport, St. Paul, MN 55111.

| Print FULL NAME                                  | Applicant's Signature_ | Date   |
|--|------------------------|--------|
| Authorized Signer's Signature:                   | Dat                    | e:     |
| By signing this page, I certify this page was co |                        |        |
|  |                        | Page 3 |

| <b>AUTHORIZED SIGNER SECTION -</b>   | - COMPANY TO FILL OUT AFTER PA  | AGES 1-3 ARE COMPLETED  |
|--|---|---|
| COMPANY NAME:  |   | APPLICANTS JOB TITLE:   |
| ☐ PRIMARY ☐ SECONDAR COMPANY   | Υ   |   |
| EMPLOYEE BADGE TYPE:   | )   | ☐ SIDA (YELLOW)   |
| ☐ KEEP CURRENT ACCESS (for renewals only)  |   | THIS EMPLOYEE HAVE A CURRENT MSP BADGE:   |
| ☐ ADD ACCESS CODES:  |   | ☐ Yes, with   |
|  |   | □ No  |
| ADDITIONAL DESIGNATIONS:   |   |   |
| ESCORTING: YES or NO   | QUOTOMO OF AL.  | VEO NO  |
| ESCORTING: YES or NO   | CUSTOMS SEAL:   | YES or NO   |
| SIGNER'S SIGNATURE   |   | TURE  |
| SIGNER NAME: PRINT LEGIBLY (NAME AND SIG   |   |   |
|  |   | Best Contact Phone:   |
| SIGNER EMAIL ADDRESS:  |   | Best Contact Priorie:   |
|  |   |   |
| badge, and has a need for unescorted acces<br>that the applicant has been continuously em<br>above information is true and correct to th | is authority. I have thoroughly reviewed<br>uployed by our company since the issuate<br>be best of my knowledge. I further affi | is an employee, eligible to apply for a litwo government-issued IDs. For renewals: I affirm ance of current badge. Under oath, I affirm that the rm that I have not made any false statements o ecuted under federal and/or state law for providing |
| x  | DAT   | E:  |
| Use BLUE ink only-no other colors we My signature certifies that I have revi   | will be accepted  | Valid only 30 DAYS from this date   |
| ☐ Needs Interpreter ☐ Student  | w/ School ID LEO/GOVT   | Fee paid by:<br>☐Individual ☐ Employer ☐ MAC  |
| MAC DEPT: DE   | LTA DEPT:   | DELTA EMP#:   |
|  | <u></u>   |   |
| Airport Operations Area (AOA) Co   | mpleted by Authorized Signer  | r   |
| Does the Applicant require Airport Operations Area ( AOA Drivers License Type Required: (check one)                                      | (AOA) Driving: (circle one) YES or NO   |   |
| ☐ Ramp / Road (non-movement area driving only)   |   |   |
| ☐ Ramp / Road + Runway   | ☐ Ramp / Road + Pushback  |   |
| ☐ Ramp / Road + Taxiway  | ☐ Ramp / Road + Tow   |   |
| ☐ Ramp / Road + Limited Tow – Military   | ☐ Ramp / Road + Limited Tow – Infield Car   |   |
| ☐ Ramp / Road + Limited Tow – T1   | ☐ Ramp / Road + Limited Taxiway - Militar   | у   |
| ☐ Ramp / Road + Limited Tow – T2   |   |   |
| Applicant has a valid State Drivers License: (circle   | one) YES or NO  |   |
| Employee Authorized Signer Name:   |   | Date:   |
| Employee Authorized Signer Email:  |   |   |
| <u> </u>   |   | PAGE 4  |

| BADGING OFFICE USE ONLY                                    |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
| ID DOCUMENTS REVIEWED BY: DATA ENTRY COMPLETED BY:         | DATE:  |  |  |  |  |  |  |  |  |
| APPLICANT Signature (must be witnessed by Trusted Agent) X | FP FeeTrans ID           Badge Fee:Trans ID           Badge Number:           Processed By:Date: |  |  |  |  |  |  |  |  |
| PRIOR BADGE?   |  |  |  |  |  |  |  |  |  |
| NEEDS SIDA CLASS? ☐ YES ☐ NO                               |  |  |  |  |  |  |  |  |  |
| CFR FORM? ☐ YES ☐ NO                                       |  |  |  |  |  |  |  |  |  |
| GREEN CARD OR EAD?  YES  NO EXPIRATION DATE:               |  |  |  |  |  |  |  |  |  |
| US CITIZEN A-NUMBER?   YES  NO A#:                         |  |  |  |  |  |  |  |  |  |
| Fingerprinting Officer:Date:                               | NOTES: (OFFICE USE ONLY)   |  |  |  |  |  |  |  |  |
| RAPBACK ENROLLMENT: E-BADGE ENROLLMENT:                    |  |  |  |  |  |  |  |  |  |
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