

“PART “A”

To:

Date:

From:

Prepared by:

Symbol:

Telephone No . - Commercial

IT IS REQUESTED THAT THE FOLLOWING PERSON(S) BE GRANTED VISIT/ACCESS APPROVAL:

FTS:

LAST NAME, FIRST, MIDDLE INITIAL AND SOCIAL SECURITY NUMBER	Check		DATE OF BIRTH	ORGANIZATION	TYPE CLEARANCE	CLEARANCE NO.	DATE OF CLEARANCE
	U.S. CITIZEN	ALIEN					
NAME OF FACILITY(IES) TO BE VISITED:				FOR THE INCLUSIVE DATES :	DOE SECURITY OFFICIAL VERIFYING DOE CLEARANCE :		

FOR THE PURPOSE OF:

TO CONFER WITH THE FOLLOWING PERSON(s):

SPECIFIC INFORMATION TO WHICH ACCESS IF REQUESTED:	ACCESS REQUESTED TO: Restricted Data <input type="radio"/> Yes      No <input type="radio"/> Other classified into <input type="radio"/> Yes      No <input type="radio"/>
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PRIOR ARRANGEMENTS HAVE/HAVE NOT BEEN MADE AS FOLLOWS:

CERTIFICATION FOR PERSONNEL HAVING DOD CLEARANCE	
This certifies that the person(s) named above needs this access in the performance of duty and that permitting the above access will not endanger the common defense and security.	
Authorized access to Critical Nuclear Weapon Design Information (CNWDI) in Accordance with DOD Directive 5210.2 <input type="checkbox"/> Yes <input type="radio"/> No	
NAME AND TITLE, REQUESTING DOD OFFICIAL	
Title, Authorizing DOD Official (See DOD Directive 5210.2 and 5210.8)	Signature (See AR 380-150; OPNAV 5510.3F; AFR 2105-1)

CERTIFICATION FOR PERSONNEL HAVING DOE CLEARANCE	
This certifies that the person(s) named above needs this access in the performance of duty.	
TITLE	REQUESTING DOE OR OTHER GOVERNMENT AGENCIES

PART “B”

Approval is granted with limitations indicated below:

Manager of Operations/or Headquarters Division Director

SEE REVERSE OF PART 5 FOR PRIVACY ACT INFORMATION STATEMENT  
OFFICIAL USE ONLY – PII –EXEMPTION 6- WHEN COMPLETED

## **PRIVACY ACT INFORMATION STATEMENT**

Collection of the information requested is authorized by Section 145 of the Atomic Energy Act of 1954, as amended (PL 83-703, 42 USC 2165). Compliance with this request is voluntary; however, if the information submitted is inadequate or incomplete, approval for your visit to a classified DOE facility, or your access to classified information may be delayed or withheld. The information you furnish will be used by DOE and DOE contractors to control access to classified information and areas.

The social security number is not required for these purposes, but you may voluntarily furnish it to assist us in correct identification.

## **BURDEN DISCLOSURE STATEMENT**

Public reporting burden for this collection of information is estimated to average 2.5 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 this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Office of Information Resources Management Policy, Plans, and Oversight, AD-241-2 - GTN, Paperwork Reduction Project (1910-1800), U.S. Department of Energy 1000 Independence Avenue, S.W., Washington, DC 20585; and to the Office of Management and Budget 90MB, Paperwork Reduction Project (1910-1800), Washington, DC 20503.