Unescorted Access Request

"FOUO, This document contains information exempt from mandatory disclosure under the FOIA. Title 5 U.S.C. 552 (b) (6) applies. This document also contains personal information that is protected by the Privacy Act of 1974 and must be safeguarded from unauthorized disclosure."

SPECIAL SECURITY REQUIREMENTS: IAW AFMAN 31-113, paragraph 3.7.1.3.3, "It is the sponsoring organization's responsibility to ensure the visit is properly recorded and documented...and the local AFOSI unit is notified when foreign visitors arrive and depart the installation.

On the day of visit and when the foreign visitors have departed the installation, email AFOSI, at AFOSI.FIS11.Clmbx@us.af.mil indicating time of arrival and departure from the installation.

I: Sponsor Information

1. Title	2. Last Name, First Name MI	3. Duty Phone	4. Cell/Home Phone	5. DoD ID Number

6. Organization/Home Address	7. Email Address

II: Access Details

8. Category of Access

- ☐ Contractor/Vendor
- ☐ Personal Services
- ☐ Delivery/Pick-Up
  (Ex: Pizza Delivery/Non Driver Status)
- ☐ Visitor/Volunteer
- ☐ Special Event
- ☐ Foreign National

9. Location

- ☐ JBSA-FSH
- ☐ JBSA-SAMMC
- ☐ JBSA-CB
- ☐ JBSA-LAK
- ☐ JBSA-RND

10. Time Frame

(Allow 30 minute lead time for entry)

From Date
From Time
To Date
To Time

Days of the Week

- Sunday ☐
- Monday ☐
- Tuesday ☐
- Wednesday ☐
- Thursday ☐
- Friday ☐
- Saturday ☐

11. Reason for Access (*Specify*)

12. Contracted Company Sponsored or Special Event Name

III: Visitor Center Use Only

13. Tracking Number

☐ NCIC III ☐ ALERTS

Vetted Date

Posted Date (For EAL Use)

Received Date

☐ SFMIS ☐ TSDB

ECP Posted Location (For EAL Use)

Digital/Wet Signature of Verifier

IV: Foreign Disclosure Office Use Only

14. Received Date

Vetted Date

Approved ☐

Case Name

Posted Date

Denied ☐

Digital Signature of FDO

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V: Guest Information

15. *Enter information for all persons 18 years of age or older (in alphabetical order).*

Last Name, First Name, MI	DOB (*DD/MMM/YY*)	ID Type	ID Number	State or Country	VCC Use Only

To submit requests click on one of the location identifiers below.

JBSA-FSH | **JBSA-SAMMC** | **JBSA-CB**

JBSA-LKD *Long Term/EAL* | **JBSA-LKD** *Short Term* | **JBSA-RND**

FDO

Tracking Number

Sponsor

15. Sponsor's Digital or Wet Signature

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VI: Explanations

The following information has been provided to aid in the completion of the Unescorted Access Request.

Section I: *Sponsor Information.*

Block 1. **Title** The sponsors title (ie; Mr., Ms., Mrs., or associated rank of Military/GS employee).

Block 2. **Last Name, First Name MI** (Full name of sponsor, use format assigned).

Block 3. **Duty Phone** (Office number you can be reached at during business hours).

Block 4. **Cell/Home Phone** (Phone number you may be reached at during requested access times for your guests).

Block 5. **DoD ID Number** (Assigned number on your DoD ID Card-This is required to fully identify you in DBIDS).

Block 6. **Organization/Home Address** (If you are sponsoring for a government purpose use your organization. If it is for personal reasons use your home address).

Block 7. **Email Address** (email submissions will be sent encrypted utilizing a .mil email address).

Section II: *Access Details*.

Block 8. **Category for Access** (Check the category of your guest).

Block 9 **Location** (Check which location(s) in the JBSA area you are requesting your guests to have access to – Must be a valid need for entry to these locations. Contractor/Vendors must provide contract stating access locations are required).

Block 10. **Time Frame**

From Date (Start date of visit/contract, etc…)
To Date (End date of visit/contract, etc…)
From Time (Start time of visit or if continual access, start time each day)
To Time (End time of visit or if continual access, end time each day)
Days of Week (Days of week entry is required - If visiting select day(s) visit will take place, if continual access is required – actual days of work required to be present)

Block 11. **Reason for Access**. Specify reason for access (ie; Meeting, Tow Truck, Pop-A-Lock, Taxi, Wedding, Family visit, etc…).

Block 12. Identify the Visiting Organization, Name of Event or if Contractor: Company Name, Contract Number and Contract Period.

Section III: *Visitor Center Use Only.*

Section IV: *Foreign Disclosure Office Use Only.*

Section V: *Guest Information*.

Foreign visitors must be processed through the Foreign Disclosure Office. Email completed form to *usaf.jbsa.502-abw.mbx.502-abw-foreign-visitors-request-workflow@mail.mil*

For more than 20 visitors [Special Event] use continuation sheets).

Block 14. Fill in the blocks [alphabetical order] for all visitors 18 years of age or older.

Last Name, First Name MI (Full name of visitor, use format assigned).
DOB: Date of Birth (Use format assigned).
Country (Country of birth for foreign visitors).
ID Type (Must be valid form of photo ID, DL – Drivers License, SID – State ID, VIC – Veteran Identification Card, PP –Passport).
ID Number (The associated number assigned to the ID Type) **State of Issue** (State where identification was issued)

If a tracking number is assigned, the sponsor will relay the number to their guest(s) for announcement at a visitor center. This will allow the Visitor Center Personnel to track completed paperwork for issuance of an access credential.

Block 15. **Digital or Wet Signature** (If capable a digital signature if preferred. If not possible, print, sign, and submit).

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V: Guest Information cont...

14. *Enter information for all persons 18 years of age or older (in alphabetical order).*

Last Name, First Name, MI	DOB (*DD/MMM/YY*)	ID Type	ID Number	State or Country	VCC Use Only

Tracking Number

Sponsor

15. Requestor's Digital or Wet Signature