



# SOUTHWEST FLORIDA INTERNATIONAL AIRPORT

## Security Identification Badge Application

### SECTION 1 - EMPLOYER SECTION

<b>APPLICATION TYPE:</b>		<b>BADGE TYPE (select only one):</b>	
<input type="checkbox"/> New Applicant <input type="checkbox"/> Renewal <input type="checkbox"/> Lost/Stolen <input type="checkbox"/> Damaged <input type="checkbox"/> Additional Company <small>(existing badge holder)</small>	<input type="checkbox"/> Modification: <input type="checkbox"/> Badge Access <input type="checkbox"/> Endorsement Change <input type="checkbox"/> Name / Title Change	<input type="checkbox"/> <b>YELLOW</b> (Secured SIDA) <input type="checkbox"/> <b>BLUE</b> (AOA SIDA Only) <input type="checkbox"/> <b>WHITE</b> (Sterile Area Only) <input type="checkbox"/> <b>GREY</b> (LEO Secured SIDA)  Temporary Employee Last Day:	
<b>ADDITIONAL ENDORSEMENTS:</b>			
<b>Authorized Signer Initials:</b> _____ <small>(by initialing you verify that the applicant has a legitimate need for the selected endorsements)</small>		<input type="checkbox"/> Escort Authority (E) <input type="checkbox"/> Non-Movement Driver (N) <input type="checkbox"/> Movement Area Driver(M)	
<input type="checkbox"/> Pushback Operator (P) <input type="checkbox"/> Baggage Training (B) <input type="checkbox"/> Contractor (C)		<input type="checkbox"/> USCBP Seal <small>(Requires CBP Approval Letter)</small>  <input type="checkbox"/> Other:	

### SECTION 2 - APPLICANT INFORMATION

All fields must be completed upon submission and must be typed. The Access Control Office will not accept this form if it is altered, torn, folded, bent, or otherwise defaced. This application must be processed within thirty days of the date it is signed by the Employer and Authorized Signatory.

First Name:		Middle Name:		Last Name:	
Aliases or Previously Used Names (full name):			Date of Birth:		Social Security Number:
Mailing Address:			City:		State:
Zip:	Phone Number:		Alternate Phone Number:		E-mail:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Race:	Height (feet/inches):	Weight (pounds):	Hair Color:	Eye Color:
City & State of Birth (or Country if not U.S.):		Country of Birth:		Country of Citizenship:	
Job Title:			Employer:		
DL/ID Type: <input type="checkbox"/> DL <input type="checkbox"/> ID Card	DL/ID Number:		DL/ID State:		DL/ID Expiration:

Every applicant must present unexpired identification issued by a government authority and at least one of which must contain a photo. For a list of acceptable documents refer to the chart on the next page of this document. **A valid driver's license (not a learner's permit) must be presented to gain access to the employee parking lot or be granted any driver endorsement.**

### SECTION 3 - WORK AUTHORIZATION (for anyone not born in the United States)

Resident Alien Card Number:	
Employment Authorization Card Number:	Employment Authorization Card Expiration:
Immigrant Visa Control Number (located at the top right hand corner of Visa and is labeled as Control Number)	Visa Expiration:
I-94 Arrival/Departure Form Number (11 digits)	Passport Country:
Certificate of Naturalization Number (9-digit number may be referred to as an ARN or INS number)	Passport Number:
Certificate of Birth Abroad Form (DS) (10-digit number in the top right corner of the document. If there is no Control Number, use document number located at the bottom, ie. FS-545, FS-240, or FS-1350)	Naturalization Date:

**List of Acceptable Identification Documents:**

LIST-A: Documents that Establish Both Identity and Employment Authorization	OR	LIST-B: Documents that Establish Identity	AND	LIST-C: Documents that Establish Employment Authorization
<ol style="list-style-type: none"> <li>1. U.S. Passport or U.S. Passport Card</li> <li>2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</li> <li>3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa</li> <li>4. Employment Authorization Document that contains a photograph (Form I-766)</li> <li>5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status:               <ol style="list-style-type: none"> <li>a. Foreign passport; and</li> <li>b. Form I-94 or Form I-94A that has the following:                   <ol style="list-style-type: none"> <li>(1) The same name as the passport; and</li> <li>(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitation identified on the form.</li> </ol> </li> </ol> </li> <li>6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI</li> </ol>		<ol style="list-style-type: none"> <li>1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as same, date of birth, gender, height, eye color, and address.</li> <li>2. ID card issued by federal, state, or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address.</li> <li>3. School ID Card with photograph.</li> <li>4. Voter's Registration card.</li> <li>5. U.S. Military card or draft record.</li> <li>6. Military dependent's ID card</li> <li>7. U.S. Coast Guard Merchant Mariner Card.</li> <li>8. Native American tribal document</li> <li>9. Driver's license issued by a Canadian government authority.</li> </ol> <p style="text-align: center;"><b>For persons under age 18 who are unable to present a document listed above:</b></p> <ol style="list-style-type: none"> <li>10. School record or report card</li> <li>11. Clinic, doctor, or hospital record</li> <li>12. Day-care or nursery school record</li> </ol>		<ol style="list-style-type: none"> <li>1. A Social Security Account Number card, unless the card includes one of the following restrictions:               <ol style="list-style-type: none"> <li>(1) NOT VALID FOR EMPLOYMENT</li> <li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li> <li>(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION</li> </ol> </li> <li>2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS545, FS-240)</li> <li>3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal</li> <li>4. Native American tribal document</li> <li>5. U.S. Citizen ID Card (Form I-197)</li> <li>6. Identification Card for Use of Resident Citizen in the United States (Form I-179)</li> <li>7. Employment authorization document issued by the Department of Homeland Security</li> </ol>

**SECTION 4 – DISQUALIFYING OFFENSES** (completed by Applicant)

Have you been convicted or found not-guilty by reason of insanity for any of the following offenses within the last 10 years? (Mark each as appropriate):

<input type="checkbox"/> Yes <input type="checkbox"/> No	Forgery of certificates, false marking of aircraft and other aircraft registration violations	<input type="checkbox"/> Yes <input type="checkbox"/> No	Unlawful Possession, use, sale, distribution, or manufacture of an explosive or weapon
<input type="checkbox"/> Yes <input type="checkbox"/> No	Interference with air navigation	<input type="checkbox"/> Yes <input type="checkbox"/> No	Rape or aggravated sexual abuse
<input type="checkbox"/> Yes <input type="checkbox"/> No	Improper transportation of a hazardous material	<input type="checkbox"/> Yes <input type="checkbox"/> No	Extortion
<input type="checkbox"/> Yes <input type="checkbox"/> No	Aircraft Piracy	<input type="checkbox"/> Yes <input type="checkbox"/> No	Armed or Felony unarmed robbery
<input type="checkbox"/> Yes <input type="checkbox"/> No	Interference with flight crew members or flight attendants	<input type="checkbox"/> Yes <input type="checkbox"/> No	Distribution of, or intent to distribute a controlled substance
<input type="checkbox"/> Yes <input type="checkbox"/> No	Commission of certain crimes aboard aircraft in flight	<input type="checkbox"/> Yes <input type="checkbox"/> No	Felony Arson
<input type="checkbox"/> Yes <input type="checkbox"/> No	Carrying a weapon or explosive aboard an aircraft	<input type="checkbox"/> Yes <input type="checkbox"/> No	Felony involving a threat
<input type="checkbox"/> Yes <input type="checkbox"/> No	Conveying false information and threats	<input type="checkbox"/> Yes <input type="checkbox"/> No	Felony involving willful destruction of property
<input type="checkbox"/> Yes <input type="checkbox"/> No	Lighting violations involving transporting controlled substances (49 USC 46315)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Felony involving burglary
<input type="checkbox"/> Yes <input type="checkbox"/> No	Unlawful entry into an aircraft or airport area that serves air carriers of foreign air carriers contrary to established security requirements	<input type="checkbox"/> Yes <input type="checkbox"/> No	Felony involving the illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than 1 year
<input type="checkbox"/> Yes <input type="checkbox"/> No	Destruction of an aircraft or aircraft facility	<input type="checkbox"/> Yes <input type="checkbox"/> No	Felony involving theft
<input type="checkbox"/> Yes <input type="checkbox"/> No	Murder	<input type="checkbox"/> Yes <input type="checkbox"/> No	Felony involving dishonesty, fraud, or misrepresentation
<input type="checkbox"/> Yes <input type="checkbox"/> No	Assault with intent to murder	<input type="checkbox"/> Yes <input type="checkbox"/> No	Felony involving possession or distribution of stolen property
<input type="checkbox"/> Yes <input type="checkbox"/> No	Espionage	<input type="checkbox"/> Yes <input type="checkbox"/> No	Felony involving aggravated assault
<input type="checkbox"/> Yes <input type="checkbox"/> No	Sedition	<input type="checkbox"/> Yes <input type="checkbox"/> No	Felony involving bribery
<input type="checkbox"/> Yes <input type="checkbox"/> No	Kidnapping or hostage taking	<input type="checkbox"/> Yes <input type="checkbox"/> No	Violence at international airports
<input type="checkbox"/> Yes <input type="checkbox"/> No	Treason	<input type="checkbox"/> Yes <input type="checkbox"/> No	Conspiracy or attempt to commit any of the criminal acts listed on the page

## SECTION 5 - 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](mailto: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.

## SECTION 6 – APPLICANT'S CERTIFICATION

**ACCURACY OF INFORMATION:** 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 Title 18 of the United States Code.)

**SOCIAL SECURITY RELEASE:** I authorize the Social Security Administration to release my Social Security Number and full name to the Transportation Security Administration, Intelligence and Analysis (IA), Attention: Aviation Programs (TSA-10)/Aviation Worker Program, 601 South 12<sup>th</sup> Street, Arlington, VA 20598. 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.

**Disclosure Obligation:** I understand I have a continuing obligation to disclose to the airport operator within 24 hours if I am convicted of any disqualifying criminal offense while I have unescorted access authority.

**SCREENING NOTICE:** Any employee holding a credential granting access to a Security Identification Display Area may be screened at any time while gaining access to, working in, or leaving a Security Identification Display Area.

By signing below you acknowledge that you have read and agree to the Privacy Act Notice (Section 5) and the certification statements above (Section 6).

Signature: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Print Name: \_\_\_\_\_ SSN: \_\_\_\_\_

## SECTION 7 – SIGNATORY AUTHORITY CERTIFICATION

I, the undersigned, will be responsible for the return of the above employee's RSW Airport Identification Badge, when it becomes necessary, for whatever reason the employee is terminated from employment, and will notify the Airport Communications Department at 590-4810 of persons who are terminated or resign employment, for any reason, immediately (i.e., at the moment of awareness). Additionally, the Lee County Port Authority Access Control Office should be immediately notified of employee status that would result in a change of any required endorsements (e.g., transferred from ramp operations to office or ticket counter staff would remove the "N" and/or "P" endorsement). A new ID with the endorsement change will be issued to the employee. Replacement value for a RSW Airport Identification Badge is \$100.00 (exact cash required) (if payment is in a check form, it should be addressed to the Lee County Port Authority). A specific need exists for providing the individual applicant with unescorted access authority. The applicant acknowledges their security responsibilities as listed under 49 CFR 1540.105(a).

Authorized Signatory Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print name: \_\_\_\_\_ Company: \_\_\_\_\_

## SECTION 8 – TRUSTED AGENT CERTIFICATION (OFFICIAL USE ONLY)

Application Reviewed:	Accepted by:	Acceptance Date/Time:	Badge Issued by:	Issued Date/Time:	Issued Badge #:
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