TOWN OF ISLIP

DEPARTMENT OF AVIATION AND TRANSPORTATION

DIVISION OF AIRPORT LAW ENFORCEMENT

LONG ISLAND MACARTHUR AIRPORT
100 ARRIVAL AVENUE / SUITE 100 * RONKONKOMA, NY 11779
631-467-3315 * FAX 631-467-3271

EMPLOYEE: (Please print)

SSN:_____

Last Name: _____ First Name:_____ Middle Name:_____ _____

Aliases or Former Names: _____

Are you a Citizen of the United States? ☐ Yes ☐ No
If not, provide ☐Alien No. ☐ Admission No. ☐ Employment Authorization No. _____

DOB:_____ Place of Birth:_____ Gender: ☐ Male ☐ Female
(State/Country)

Eye Color: _____ Hair Color: _____ Height: _____ Weight: _____

Race: ☐ Asian ☐ African American/Black ☐ Caucasian ☐ Latino ☐Native American ☐ Unknown

Driver's License No. _____ Issuing State: _____ Expiration Date: _____

Home Address: _____ Apt #: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Home Phone: _____

Email: _____ Cell Phone: _____

HAVE YOU EVER HAD YOUR SIDA BADGE SUSPENDED OR REVOKED? _____
If yes, provide details: _____
_____

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). ***NOTE: Signature must be original***
Employee Signature: _____ ***Date:*** _____

EMPLOYER: (Please print) SIDA ACCESS REQUESTED

☐ **SIDA** ☐ **NON SIDA**
☐ **ESCORT** ☐ **NON ESCORT**
☐ **MOVEMENT** ☐ **NON MOVEMENT**

Company Name: _____ *Subcontractor Name:* _____

Mailing Address: _____

City, State, Zip: _____

Manager/Supervisor (Please Print) : _____

By my signature I certify that I am an authorized representative of the above employer and as such may execute (sign) this application; that the foregoing information is true, accurate and all information is verified; that the named employer authorizes an electronic fingerprint be obtained for the purpose of performing a criminal history record check and is responsible for all applicable fees and charges; and that the employee's SIDA Badge will be returned upon request, termination or when access is no longer required; and that the above named employee is required to have access to secure areas of the Airport.

Signatory Authority Signature: _____ ***Date:*** _____

NOTE: *Signatory signature must be original signature*

PRIVACY ACT STATEMENT

Authority: 49 U.S.C. §114, 44936 authorizes the collection of this information.

Purpose: The Department of Homeland Security (DHS) will use the biographical information to conduct a security threat assessment to evaluate your eligibility for the program to which you are applying. Your fingerprints and associated information/biometrics 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/biometrics 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 the fingerprints for enrollment into the US-VISIT's Automated Biometrics Identification System (IDENT). If you provide your Social Security Number (SSN), DHS may provide your name and SSN to the Social Security Administraiton (SSA) to compare that information against SSA's records to ensure the validity of your name and SSN.

Routine Uses: This information may be shared 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 Transportation Security Threat Assessmant Systems (T-STAS), DHS/TSA 002. For as long as your fingerprints and associated information/biometrics 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: Furnishing this information (including your SSN) is voluntary; however, if you do not provide your SSN or any other information requested, DHS may be unable to complete your application for identification media.

CERTIFICATION

"I authorize the Social Security Administration to release my Social Security Number and full name to the Transportation Security Administration, Office of Transportation Threat Assessment and Credentialing (TTAC), Attention: Aviation Programs (TSA-10) Aviation Worker Program, 601 South 12th 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." **NOTE: Signature must be original**

Signature: _____Date of Birth:_____

SSN and Full Name (Print) _____

Employer _____

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FINGERPRINT APPLICATION

Individuals seeking unescorted access authority and/or performing security screening are required to undergo a fingerprint-based criminal history records check that does not disclose that he/she has been convicted, or found guilty by reason of insanity, of a disqualifying criminal offense in the past 10 years. There are 28 disqualifying crimes under Federal Aviation Regulation (part 1542.209) that will disqualify you from receiving a SIDA badge. Those crimes are:

1. Forgery of certifications, false marking of aircraft and other aircraft registration violation
2. Interference with air navigatioin.
3. Improper transportation of a hazardous material
4. Aircraft piracy
5. Interference with flight crew members or flight attendants.
6. Commission of certain crimes aboard aircraft in flight
7. Carrying a weapon or explosive aboard aircraft.
8. Conveying false information and threats.
9. Aircraft piracy outside the special aircraft jurisdiction of the United States
10. Lighting violations involving transporting controlled substances
11. Unlawful entry into an aircraft or airport area that serves air carriers or foreign air carriers contrary to established security requirements
12. Destruction of an aircraft or aircraft facility
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. Extortion
22. Armed or felony unarmed robbery
23. Distribution of, or intent to distribute, a controlled substance
24. Felony arson
25. Felony arson involving a threat
26. Felony involving
    a. Willful destruction of property
    b. Importation or manufacture of a controlled substance
    c. Burglary
    d. Theft
    e. Dishonesty, fraud, or misrepresentation
    f. Possession or distribution of stolen property
    g. Aggravated assault
    h. Bribery
    i. Illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than 1 year
27. Violence at international airports
28. Conspiracy or attempt to commit any of the criminal acts listed in this paragraph

By my signature I certify that I do not have a disqualifying criminal offense and I do consent to an electronic fingerprint criminal history records check; in accordance with 49 CFR 1542.209. I understand my obligation to disclose to the airport operator within 24 hours if convicted of any disqualifying criminal offense that occures while having unescorted access authority; the information I have provided on this application is true, complete and correct to the best of my knowledge and belief and is provided in good faith; I understand a knowing a willful false statement on this application can be punished by fine or imprisonment or both (see section 1001 of Title 18 United States Code). **NOTE: Signature must be original**

Printed Name _____

Signature _____ Date _____

A copy of the criminal record received from the FBI will be provided to the individual, if requested by the individual in writing. The request should be submitted to the Airport Security Director, who is the point of contact for questions about the results of a criminal history records checks.

LISTS OF ACCEPTABLE DOCUMENTS

All documents must be unexpired

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**
1. U.S. Passport or U.S. Passport Card		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 name, date of birth, gender, height, eye color, and address		1. Social Security Account Number card other than one that specifies on the face that the issuance of the card does not authorize employment in the United States
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)				2. Certification of Birth Abroad issued by the Department of State (Form FS-545)
3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa		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		3. Certification of Report of Birth issued by the Department of State (Form DS-1350)
4. Employment Authorization Document that contains a photograph (Form I-766)		3. School ID card with a photograph		
		4. Voter's registration card		4. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
5. In the case of a nonimmigrant alien authorized to work for a specific employer incident to status, a foreign passport with Form I-94 or Form I-94A bearing the same name as the passport and containing an endorsement of the alien's nonimmigrant status, as long as the period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form		5. U.S. Military card or draft record		
		6. Military dependent's ID card		
		7. U.S. Coast Guard Merchant Mariner Card		5. Native American tribal document
		8. Native American tribal document		6. U.S. Citizen ID Card (Form I-197)
		9. Driver's license issued by a Canadian government authority		
		For persons under age 18 who are unable to present a document listed above:		7. Identification Card for Use of Resident Citizen in the United States (Form I-179)
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		10. School record or report card		8. Employment authorization document issued by the Department of Homeland Security
		11. Clinic, doctor, or hospital record		
		12. Day-care or nursery school record		

Non US citizenship – In the event the applicant is not a US citizen, the individual must provide the Alien Registration Number (ARN) or the I-94 Arrival/Departure Form Number.

US citizenship, non-US country of birth – In the event the applicant is a US citizen with a non-US country of birth, the individual must provide either a US passport number, Certificate of Naturalization Number (ARN), or a Certification of Birth Abroad (Form DS-1350)