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 AOA 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: Must be original signature***

Employee Signature: _____ ***Date:*** _____

AOA ACCESS

☐ **ENCODED** ☐ **ESCORT** ☐ **NON- ESCORT**

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 a Security Threat Assessment to be obtained for the purpose of obtaining an AOA Access Badge and is responsible for all applicable fees and charges; and that the employee's AOA 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: Must be original signature**

Signature: _____Date of Birth:_____

SSN and Full Name (Print) _____

Employer _____

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)