U.S. Department of Commerce - Office of Security
Security Coversheet / Request for Investigation Coversheet

Date: _____

Status:		⃝ Volunteer/Student
⃝ Federal Employee		⃝ Associate/Guest
⃝ Contractor		⃝ Foreign National *(See Note 1)
Bureau / Line Office		

Legal Name (First, Middle, Last)				
Other Names Used (example Maiden Name)				
Social Security Number		Gender ⃝ Male ⃝ Female	Date of Birth (MM/DD/YYYY):	
Place of Birth (City, State, Country)				
Country of Citizenship		Dual Citizenship		
Subject's Email Address				

Visa Number		Alien Registration Number	

Position Title	
Geographic Code (If Employee)	
Duty Station (complete address)	

Start Date (EOD)		End Date	
Contact Company		Contract Number	
Supervisor / COR		Supervisor 's / COR's Phone #	
HR/COR/Sponsor Email			
HR/COR/Sponsor Signature			
Previous Federal / DOC Work Dates			

Type of investigation (check one)	Prints ⃝ (less than 30 days)	SAC ⃝ (less than 179 days)	NACI ⃝	CNACI ⃝
	ANACI ⃝	MBI ⃝	BI ⃝	SSBI ⃝

Position Sensitivity (check one)	Low Risk ⃝	Moderate Risk ⃝	High Risk ⃝
	Noncritical-Sensitive ⃝	Critical-Sensitive ⃝	Special-Sensitive ⃝

Mandatory Financial Fields for Processing Background Investigations

Treasury Account Symbol (TAS)		
Obligating document number		
Business Event Type Code (BETC)		
Accounting Data	(organization code)	
	(project code)	

*NOTES:

1) You must complete additional requirements listed in DAO 207-12 to obtain authorization for foreign national access to a DOC facility. Please contact your Servicing Security Office if you have any questions.

2) DO NOT EMAIL this when filled-out. It will contain Personally Identifiable Information (PII).

Revised 06/06/2014