



Kern County Department of Airports Meadows Field

Fingerprint / Badge Application

(APPENDIX 10)

- BADGE TYPE**
- SIDA - INTL
 - SIDA - UNR
 - SIDA - RES
 - TSA
 - VENDOR

*****Privacy Act Notice**

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 Investigations (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 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 Administration (SSA) to compare that information against SSA's records to ensure 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 Assessment System (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 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.

PLEASE PRINT OR TYPE)

Email Address

Legal Last Name

Legal First Name

Legal Middle Name

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List all other used names, aliases and/or nicknames (include given and surnames)

Daytime Telephone Number

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Current Mailing Address (include Street Number, Street, Unit Number, City, State, Zip Code and Country)

Gender (M/F)	Date of Birth (mmddyyyy)	Country of Birth (NCIC 2-Character abbreviation)	Citizenship Country Code (NCIC 2-Character abbreviation)

*Social Security Number	Drivers License / ID Number (Include State)	Hair Color	Eye Color	Height	Weight

Alien Registration #	I-94 Arrival/Departure Form #	Non-Immigrant Visa Control #

U.S. Passport #	Certificate of Naturalization # (ARN or INS) or DS1350 Certification of Birth Abroad

Employer	Job Title

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 on this application can be punished by fine or imprisonment or both. (See section 1001 of Title 18 United States Code).

Print Full Name of Applicant	Signature of Applicant	Date

***SSN Release** 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-19)/ Aviation Worker Program, 6595 Springfield Center Drive, Arlington, VA, 20598-6010. 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.

Full Name	Signature	SSN	Date of Birth

(Office use only)

Airport Code: _____ Airport Category: _____

- Drivers License (State _____) and one of the following:
 Passport INS Card Social Security Card Birth Certificate Other _____
 Identification presented and verified by _____:

Media Number	Access Level	Media Type	Media Status	Status Date

If Revoked; Reason: (circle) LOST / STOLEN / DESTROYED / TERMINATED / EXPIRED / NOT RETURNED / OTHERWISE UNACCOUNTED FOR

MANDATORY CRIMINAL QUESTIONNAIRE ("Yes" or "No" MUST be checked for each item listed)

You are subject to a fingerprint-based Criminal History Records Check (CHRC). Within the past ten years, have you been convicted or found not guilty by reason of insanity of any of the following offenses?

Table with 4 columns: Yes/No checkboxes, Offense description, Yes/No checkboxes, Offense description. Rows include offenses like Forgery of certificates, Aircraft piracy, Murder, Assault with intent to murder, etc.

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 that a knowing and willful false statement on this application can be punished by fine or imprisonment or both.

FULL NAME OF APPLICANT (Please Print) SIGNATURE OF APPLICANT DATE

A copy of the criminal record received from the FBI will be provided to the individual, if requested in writing. Questions regarding the fingerprinting process or correspondence may be directed to the County of Kern, Department of Airports, Airport Security Coordinator.

AUTHORIZED SIGNER INFORMATION

I hereby certify that the aforementioned individual is approved to be processed to receive a SIDA, TSA, Non-SIDA or Vendor badge in accordance with all applicable provisions of 49 CFR 1542.209 and 49 CFR 1544.229. I understand that the applicant must submit to a fingerprint based "Criminal History Records Check" (CHRC) and be cleared to receive the requested badge.

NAME OF AUTHORIZED SIGNER (PRINT) TITLE SIGNATURE DATE

Initials indicate approval for applicant to operate a vehicle on the ramp / AOA Initials indicate approval for applicant to operate Loading Bridges / Jetways (Applicant must receive training)

TERMS AND CONDITIONS

- Badge remains the sole property of the County of Kern, Department of Airports
Badge shall be immediately returned to Airport Law Enforcement or Airport Operations upon demand and/or upon termination of need of access to the area(s) authorized.
Badge is non-transferable.
Badge holder will display badge on outermost garment above waist while in required areas.
Badge is for official use by authorized person named on badge only.
Badge holder agrees to abide by all applicable federal, state and local laws, rules and regulations while in authorized area(s) and to conduct their activities in a safe manner consistent with procedures outlined in the Airport Security Program and/or Airport Certification Manual.
No person shall knowingly or willfully allow unauthorized persons access to non-public restricted areas by use of airport identification badge.
If a badge is lost or stolen, the holder shall immediately notify Airport Law Enforcement or Airport Operations.
If a badge is lost, stolen or damaged (due to abuse) the holder will be charged a \$40.00 replacement fee for the 1st occurrence, 2nd occurrence \$80 and 3rd occurrence \$200.00.
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
VIOLATIONS OF AIRPORT IDENTIFICATION BADGE TERMS AND CONDITIONS MAY RESULT IN IMMEDIATE REVOCATION OF THE IDENTIFICATION BADGE AND ACCESS PRIVILEGES.

I have read and understand the above terms and conditions and will abide by all airport rules and regulation.

SIGNATURE DATE