Foreign National Request for Access: Visit/Event Information

(To Be Completed by Sponsor)

Federal Law Enforcement Training Center

Information provided by those completing this form will be used to conduct background checks on the applicant in accordance with FLETC Directive 71-01, Access Control, FLETC Directive 71-12, Visits to FLETC Facilities by Foreign Nationals and Department of Homeland Security (DHS) Management Directive 11052, Internal Security.

Privacy Act Statement: This information is provided in accordance with the Privacy Act of 1974 (5 USC 552a). Authority for this information is 5 USC 301, 5 USC 4101 et seq., Executive Order No 11348, and Department of Homeland Security Delegation Number 7050. Disclosure of this information is voluntary. Failure to provide requested information may result in denial of access to the FLETC of DHS property, information or training.

Directions: Complete one FTC-SEM-17b-1 for each visit – whether by an individual or group. Complete one FTC-SEM-17b-2 for each individual foreign national visitor. Combine the FTC-SEM-17b-1 and FTC-SEM-17b-2's into one package and submit. Complete FTC-SEM-17b-3 only for FLETC-sponsored foreign national students as required for financial documentation.

1. FLETC(s) to visit	☐Glynco ☐Artesia ☐ Cheltenham ☐Charleston ☐Off-Site ☐Other:_____				
2. Access	Arrival Date:		Departure Date:		Intermittent Access? ☐ Yes ☐ No
3. Type of Visitor	☐ Graduation Guest ☐ Training (Student) ☐ Training (Instructor) ☐ Contractor ☐ Official Visit from Foreign Government ☐ Personal Guest ☐ Other: _____				
4. Purpose of Visit	☐Speech or Presentation ☐Training ☐Briefing ☐Conference Attendance ☐Tour ☐Information Meeting ☐Site Visit ☐Media Event ☐Experiment ☐Research ☐Commercial/Contract Services ☐Employment ☐Equipment Repair/Installation ☐Other:_____				
If attending or providing Training, provide Title of Course:					
Course Number:		Beginning Date:		Ending Date:	
If attending a Graduation Ceremony, provide Name and Class Number of Graduate:					
If foreign national is attending an exported training session, provide training location address:					
5. Justification for Visit	☐ Attend Graduation Ceremony for Class _____ ☐ Attend Training ☐ Provide Training ☐ Attend Official Meeting ☐ Provide Contract Services ☐ Other:_____				
6. Will sensitive information be discussed?	☐ Yes ☐ No	**If yes, please describe:**			

7. Interactions with Personnel with a Clearance **List escorts in block 10.** **(Attach additional page if needed)**	**Full Name**	**Title**	**Division**	**Telephone Number**

8. Will IT access be permitted?	☐ Yes ☐ No	**If yes:**	☐ On-site ☐ Off-site ☐ Both ☐ Unknown

9. Building/Room to be visited (Attach additional if needed)	**Type** (to be completed by SEM)	**10. For official visits only: If sponsor is not the escort or if additional escorts are required/will be provided, identify these escorts.**		
		Name (must be US citizen)	**Telephone Number** (include area/country code)	**Has Security Clearance?**
	☐L ☐P ☐V ☐___			
	☐L ☐P ☐V ☐___			☐ Yes ☐ No
	☐L ☐P ☐V ☐___			☐ Yes ☐ No
	☐L ☐P ☐V ☐___			☐ Yes ☐ No
	☐L ☐P ☐V ☐___			☐ Yes ☐ No

11. Sponsor/Host Information

Name: _____ Sponsor has received Foreign National Escort Training?: ☐ Yes ☐ No

Last First Middle

Agency: _____ Building: _____ Room: _____

I am requesting access for the foreign national(s) identified on the attached sheets and will be responsible for them and their activities while they are on the FLETC. If this is a visit by an international delegation, I verify that I have attended or will attend FLETC foreign national escort training prior to the above arrival date. I will abide by and ensure that others in my party abide by FLETC security practices, including the protection of Sensitive But Unclassified (SBU) information.

Sponsor's Signature:		**Phone:**		**Date:**	