

Foreign National Request for Access: Information on Individual Foreign National
 (To Be Completed by Foreign National Applicant)
 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, Executive Order 9397, 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.

1. Applicant's Full Name		2. Personal Data	
_____ Last First Middle		Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
		Date of Birth:	_____
Aliases:		City of Birth:	_____
_____		Country of Birth:	_____

3. Country or Countries of Citizenship		4. Visa Information (Copy of Visa MUST be attached)	
_____		U.S. Visa Number:	_____
List more than one if applicable		Visa Expiration Date:	_____
Passport Country of Issue:		Visa Type:	_____
Passport Number:		Or <input type="checkbox"/> Visa Not Required for This Country or Purpose	
Passport Expiration Date:			

5. Alien Registration Information (if applicable)		6. Language Status	
<input type="checkbox"/> Not applicable Resident Alien Number: <input type="checkbox"/> Permanent Resident status. A#: _____		Government representatives, instructors and trainees only:	
<input type="checkbox"/> Non-immigrant status: I-94 #:		Will interpreter be needed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> Other status:		<i>Note:</i>	
Expiration Date: _____		<i>Interpreters who are not U.S. Citizens are also required to complete Request for Foreign National Access Forms.</i>	
Social Security Number: _____			

7. Employer Information		8. Family Information	
Name of Company/Employer: _____		Provide names of family members traveling with you.	
Country of Employer: _____		First Name	Last Name
Employer Address: _____			Relationship
_____			Gender
_____		_____	
Title or Position: _____		_____	
		<i>NOTE:</i>	
		<i>Students at FLETC are not permitted to bring family members with them. If there is a question, please contact your advisor.</i>	

9. If attending a Graduation Ceremony, provide Name and Class Number of Graduate: _____

10. Other Pertinent Information

11. Applicant Signature and Certification

I certify that the information provided is true and accurate to the best of my knowledge. I acknowledge that knowingly or willfully falsifying information in the document is a violation of 18 US Code Section 1001.

Applicant's Signature: _____ Phone: _____ Date: _____