

## SPONSORED PASS APPLICATION - FORT BELVOIR INSTALLATION ACCESS

**PRIVACY ACT ADVISEMENT:** The information requested is for the purpose of granting access to the Fort Belvoir Installation. Providing requested information, to include your social security number (SSN), is voluntary. However, your access may not be granted if all requested information is not provided. **AUTHORITIES:** Executive Orders (EO) 10450, 10865, and 12333. The SSN, required for record accuracy, is requested pursuant to EO 9397. All information that contains PII is protected as required.

### VISITOR APPLICANT INFORMATION

<b>Last Name</b> (as it appears on your ID)	<b>First Name</b> (as it appears on your ID)	<b>Social Security Number</b> (full SSN required)
<b>Date of Birth</b> year _____ month _____ day _____		<b>Gender</b> male _____ female _____
<b>Driver's License or State Identification Card Number</b> (driver's license information is required if driving)	<b>State</b>	<b>U.S. Passport Number</b> (if driver's license or state ID is not available)
<b>Employment Authorization Card Number</b> (Form I-766) (if applicable)		<b>Permanent Resident Card Number</b> (Form I-551) (if applicable)
<b>Your Destination on Fort Belvoir</b> (bldg #, bldg name, or address)	<b>Justification for Access</b> work _____ visiting _____ other: _____	
<b>Email Address</b> (is only used if application is incomplete or denied access)	<b>Contact Phone Number</b> (is only used if application is incomplete or denied access)	

**Applicant Certification:** I certify the information provided is true and accurate, and I am providing it with the purpose of receiving a ACCESS PASS to allow access onto Fort Belvoir. I understand that I am required to turn in or destroy the pass upon expiration or prior to expiration. If I fail to do so my access to Fort Belvoir can be denied for any and all future requests. I understand that I must give Fort Belvoir Visitor Control Center consent to an initial and periodic background screenings prior to and after the issuance of an installation access badge/pass. Failure to do so will result in the termination of the application process. I further understand that these background screenings will determine my eligibility for access and continued access during the term of my request.

<b>Applicant Signature</b>	<b>Date</b>
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### SPONSOR INFORMATION

**Sponsor:** U.S. Military ID card holder, U.S. dependent ID card holder 18 years of age and older, and DoD CAC holder. Sponsor must sign with their digital CAC signature. If unable to CAC sign, you must sign in ink and submit the application from your .Mil email. All other sponsors must meet their visitor/applicant at the Visitor Center to sponsor them on arrival. You'll complete the pass application in office on arrival, or have the completed application in-hand.

<b>Name</b> (last, first, middle initial)	<b>Grade / Rank or Dependent</b>
<b>DoD Email Address</b>	<b>Organization Address / Unit Address</b> (if you work on Fort Belvoir)
<b>Home Address</b> (if you live on Fort Belvoir)	<b>Contact Phone Number</b>

**Requested Pass Duration. Enter a date.** (when do you want their pass to expire; not to exceed 1 year).

**SPONSOR'S CERTIFICATION:** I certify that the applicant meets the justification requirements and that they require a PASS as indicated above in order to perform assigned duties, conduct official business or visit family/friends on Fort Belvoir. I understand my role as the sponsor and ensuring the PASS is retrieved upon expiration or prior to expiration if it is no longer required. If I fail to do so, my ability to be an approved sponsor can be removed.

<b>Sponsor Signature</b>	<b>Date</b>
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### Section Below Completed by the Visitor Control Center

<b>Issuing Official Name</b>	<b>Today's Date</b>	<b>Expiration Date</b>
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