

# USAG-HI Controlled Access Pass (CAP) Application

To: Visitor Control Center

VCC Office Phone: (808) 655-1620

**FAMILY CARE PLAN**

( )

**HOUSEGUEST**

( )

**CAREGIVER**

( )

**VISITOR**

( )

Request the following individual be authorized a U.S. Army Garrison Hawaii VCC Common Access Pass (CAP).

<b>APPLICANT INFORMATION</b>	Applicant Information	
	Applicant Name: _____	SSN: _____ Sex: _____
	Date of Birth: _____	Eye Color: _____ Hair Color: _____ Height: _____ Weight: _____
	City / State / Country of Birth: _____	
	Relationship to Sponsor: _____	
	Home Address: _____	Phone #: _____
	House Number / Street Name / Apt. Number	
	Duration of Pass: _____	
<b>SPONSOR INFORMATION</b>	City _____ Zip Code _____ DD/MM/YYYY _____ DD/MM/YYYY _____	
	<b>STATEMENT OF UNDERSTANDING:</b> I UNDERSTAND THAT AS THE SPONSOR, I AM RESPONSIBLE FOR THE ACTIONS OF THE ABOVE NAMED INDIVIDUAL. REPORTS OF MISCONDUCT MAY BE CAUSE FOR IMMEDIATE TERMINATION OF THIS AUTHORIZATION. I ALSO UNDERSTAND THAT IF THE PASS IS NO LONGER NEEDED AND HAS NOT EXPIRED, I WILL RETRIEVE THE PASS AND TURN IT OVER TO THE INSTALLATION ACCESS PASS OFFICE.	
	Sponsor Name: _____	Rank / Grade: _____
	Sponsor SSN: _____	Duty Phone: _____ HomePhone: _____
	Sponsor's Signature: _____	Date: _____
	Sponsor's Address: _____	
	Commander's Name: _____	Rank / Grade: _____ Duty Phone: _____
	Commander's Signature: _____	Date: _____
	<i>Only E-6 and below requires a Unit Commander's Signature</i>	
	<b>IPC ACKNOWLEDGMENT</b>	IPC Community Center Manager Name: _____
IPC Community Center Manager Signature: _____		
Housing Comments: _____		
<b>STATEMENT OF UNDERSTANDING:</b> BY SIGNING THIS APPLICATION FOR A COMMON ACCESS PASS (CAP) ID CARD, I AGREE TO ABIDE BY ARMY REGULATIONS WHILE ON U.S. ARMY GARRISON, HAWAII INSTALLATIONS. I ALSO CERTIFY THAT ALL INFORMATION PROVIDED ON THIS FORM IS TRUE AND CORRECT.		
<b>AUTHORIZATION:</b> HOMELAND SECURITY PRESIDENTIAL DIRECTIVE 12 AND ARMY REGULATION 190-13 REQUIRES THAT ANY PERSON NOT POSSESSING A GOVERNMENT ISSUED IDENTIFICATION AND WISHING TO BE GRANTED ACCESS TO A FEDERAL FACILITY BE VETTED USING THE <b>NATIONAL CRIME INFORMATION CENTER (NCIC)</b> . The following issues will prevent access to USAG-HI installations: Current Arrest Warrant, Currently Barred from entry to Federal Installations, Any felonies within the last 10 years, Registered Sex Offenders, Crimes encompassing Sexual Assault, Armed Robbery, Rape, Child Molestation, production or possession of Child Pornography, Trafficking in Humans, Drug Possession with intent to sell or Drug Distribution, Espionage, Sabotage, Treason, Terrorism, Murder, Firearms/Explosive violation, or Acts or Activities designed to overthrow the U.S. Government by force. USAG-HI can add further disqualifying factors that would deny an individual access onto its installations.		
Applicant's Signature: _____		Date: _____
<b>NCIC DETERMINATION</b>	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; border-radius: 15px; padding: 5px 20px; text-align: center;">APPROVED</div> <div style="border: 1px solid black; border-radius: 15px; padding: 5px 20px; text-align: center;">DENIED</div> <div style="border: 1px solid black; border-radius: 15px; padding: 5px 20px; text-align: center;">NO DRIVING ON POST</div> </div> <p style="text-align: center; margin-top: 5px;"><b>Check all that apply:</b></p>	
	NCIC Checked By: _____	Date: _____
	Applicant Info Authenticated By: _____	Date: _____
	<b>PRIVACY ACT INFORMATION</b>	
<p><b>Authority:</b> Title 10, United States Code, Section 2012</p> <p><b>Principal Purpose:</b> The purpose for requesting personal information is to assist civilian access on to U.S. Army Garrison, Hawaii Installations.</p> <p><b>Routine Use:</b> Information provided may be used to determine suitability of applicants desiring access on to U.S. Army Garrison, Hawaii Installations as well as for other lawful purposes including law enforcement and litigation. For other official purposes, information on this form may be provided to other law enforcement agencies.</p> <p><b>Disclosure:</b> Submitting requested information is voluntary, however failure to provide information will result in access privileges being refused or withdrawn. The Privacy Act Statement will apply throughout the duration of the Common Access Pass (CAP).</p>		