USAG-HAWAII ACCESS CONTROL DENIAL WAIVER APPLICATION

1. PURPOSE

- a. If you have been denied access at a Vehicle Processing Center (VPC) or the Visitor Control Center (VCC) based on the regulatory required National Crime Information Center (NCIC) Interstate Identification Index (III) check utilized to determine identity vetting you may request for an access denial waiver by completing the following steps:
- (1) Obtain a certified copy of your complete criminal history, including all arrests and convictions, from the appropriate Clerk of the Court. This criminal history must include all matters that were noted in your NCIC III check.
- (2) Obtain a letter of support from your employer. The letter must, at least, indicate that your employer will employ you upon the issuance of a waiver. In cases where you are visiting a government sponsor on post, you must include your sponsor's; full name, rank/status, unit/organization, address for on-post residence or location of visitation, telephone number and dates of visitation.
- (3) Complete the attached USAG-Hawaii Access Control Denial Waiver Application in its entirety and submit your application packet to your government sponsor who will be responsible for the submission of the waiver application to the Community Compliance Office (CCO). You must list all offenses and provide an explanation about why your offenses should not bar you from coming on USAG-Hawaii in the application.
- (4) The government sponsor will review the applicant's packet for completeness and determine if a waiver is warranted for the applicant before submission to CCO.
- (5) The government sponsor must provide a letter of recommendation for the applying applicant. The government sponsor should address the respective offenses and indicate why those offenses should prevent the applicant from being barred from USAG-Hawaii. The government sponsor can scan all the documentation and email to a representative from the CCO. Alternatively, the government sponsor can hand deliver the waiver application to the CCO, 745 Wright Avenue, Bldg 107, Room 302A, WAAF.
- b. Upon satisfaction of the following steps, the CCO, will review the applicant's application. The fitness determination representative will determine based on the information provided whether the applicant fits into one of the following categories:
- (1) The applicant is prohibited for life from obtaining a denial waiver for access to USAG-Hawaii;

- (2) The applicant has been convicted within 10 years regardless of the offense or violation at the time of submitting a denial waiver is prohibited for ten (10) years from the date of discharge of their sentence from obtaining a denial waiver;
- (3) The applicant has a current arrest warrant in NCIC, regardless of the offense or violation.
- c. If you are not disqualified for one of the above reasons, the reviewing officer will forward the package with a recommendation to the Garrison Commander for a final decision on your status.
- d. The applicant will be mailed a copy of the Garrison Commander's decision. If you state on your application, a scanned copy can be emailed to you. It is your responsibility to provide the CCO with your current address in the application. If the decision is returned to the CCO due to an incorrect address, no further notice will be sent to you and your waiver request will not be processed.
- e. Should your request be denied, an appeal must state new grounds for an appeal, such as missing information, etc., before it will be accepted.
- **2. PROCEDURES.** To ensure that your request is complete, please follow these instructions:
- a. Submit the completed application to your government sponsor. The government sponsor will review, complete cover letter recommendation, and hand deliver, fax, or email the following two items to the CCO when the packet is completed:
- (1) The attached request for denial waiver application (starting at page three of this packet).
- (2) All supporting documents, including those certified by the Clerk of the Court, for the waiver application.

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<u>WARNING:</u> ANY MISREPRESENTATION OR OMISSION OF INFORMATION MAY RESULT IN DENIAL OF THE REQUEST

REQUEST FORM				
Please type or print neatly; Attach additional sheets if necessary				
1. Name (First/Middle/	(Last)			
2. Current Address (Nu	umber and Street, City, St	tate, and ZIP Code)		
3. Email address:	-11111			
	sion emailed back to you	ratner than mailed to yo	ou? Yes	
4. Current Telephone N		I- ()		
Home () Work ()				
5. Reason for requesting access to USAG-Hawaii?				
6. What job has USAG-Hawaii offered you?				
7. Does your job require you to have a clearance?				
8. List Your ENTIRE Criminal History (<i>except traffic and other infractions</i>) as follows:				
CRIME FOR	CRIME FOR	NAME & ADDRESS		
WHICH YOU	WHICH YOU	OF COURT OR	(INCLUDE	
WERE ARRESTED	WERE CONVICTED	AGENCY	SENTENCE AND	
	(OR INDICATE IF		CONVICTION	
	DISMISSED OR		DATE)	
	NULL PROS.)			
9. Attach a copy of all court documents, certified by the Clerk of the Court, from all of your conviction(s).				
10. In your own words, explain the facts of each felony, and why you should be able to come				
on post. Attach additional sheets if necessary.				
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11. Explain any circumstances that lessent show that you have been rehabilitated. Atta	the seriousness of the felony conviction(s) and
show that you have been renabilitated. Atta	acti additional sheets if necessary.
12. Have you been denied access by any of	ther federal organization? (please circle)
Yes No	
If yes, indicate the reason for the denia	l.
13. List all references that you would like t	the review officer to consider on your behalf.
Include name, address, telephone number, a	_
1	1
VFR	RIFICATION
State of County of	f) Under the penalty of
neriury the undersigned has examined this r	request for review and to the best of my knowledge
and belief, it is true, complete, and correct.	equest for review and to the best of my knowledge
and benef, it is true, complete, and correct.	
	Your Signature
	Tour Signature
	Your Printed Name
	Tour Finited Ivaine
	Data (Manufly Dans Varies)
	Date (Month, Day, Year)
Defens me the understand a Naton	w. Dublic in and for said County and State marsonally
	ry Public in and for said County and State, personally
	d acknowledged the execution of the foregoing
instrument as his/her voluntary act and deed.	
WITNESS	1 6
WITNESS, my hand and Notarial Seal, this	day of, 20
	N. D. 11' W.''. C'
	Notary Public, Written Signature