

APPLICATION FOR ORGANIZATION-SPONSORED INSTALLATION ACCESS PASS										TRACKING #	
For use this form, see USFKI 5200.08 and the proponent agency is USFK Provost Marshal Office. SEE PRIVACY ACT STATEMENT ON PAGE 2										RECEIVED DATE	
SECTION I- TO BE FILLED OUT BY SPONSOR AND APPLICANT (TYPE OR PRINT)											
1. NAME (LAST, FIRST, MIDDLE)				2. SEX FEMALE MALE		3. a KID/SSN OR PASSPORT			3.b NATIONALITY		
4.DOB (YYYYMMDD)	5. HEIGHT (INCHES)	6. WEIGHT (POUNDS)	7. HAIR	8. EYES	9. GLASSES YES NO	10. POB (CITY/COUNTRY)					
11. ADDRESS & PHONE NUMBER											
11.a. CURRENT ADDRESS & PHONE NO. (ST NO., CITY & PROVINCE)						11.b. PERMANENT ADDRESS & PHONE NO. (ST NO., CITY & PROVINCE)					
12. ACCESS REQUIRMENTS (If USFK or 8A-wide, special processing required; submit 60 days in advance)											
12.a. ACCESS AREA		12.b. FPCON (A,B,C,or D)	12.c. HPCON (0, A, B, C, or D)	12.d. ESCORT PRIVILEGE YES NO PER(S) VEH(S)				12.e. HOURS		12.f. DAYS	
12.g. PASS TYPE EMPLOYEE ROK MILITARY SPONSORED GUEST ROK GOVERNMENT OFFICIALS CONTRACTOR ALLIED NATION SG SPOUSE (RED) ROK MILITARY FAM MBR US EMBASSY VOLUNTEER DRIVER (RED) KOREAN SERVICE CORPS								12.h. STATUS INITIAL RENEWAL UPDATE			
								12.i. MISSION ESSENTIAL PERSONNEL(MEC) YES, Position #: _____ NO			
13. SPONSOR INFORMATION											
13.a. SPONSOR (FULL NAME/RANK or GRADE)				13.b. SPONSOR FULL SSN or DODID#			13.c. SPONSOR ORG & PHONE NUMBER				
14. JUSTIFICATION FOR INSTALLATION/BASE ACCESS (ATTACH COPY OF KID CARD OR PASSPORT, PREVIOUS PASS, as applicable) (FPCON level, escort privilege, access area, and days/hours of access must be justified in detail)											
SPONSOR STATEMENT OF UNDERSTANDING											
I fully understand my responsibilities as a sponsor for the control of the person identified at the top of this application. All information submitted is true and correct to the best of my knowledge. I further understand that it is my responsibility to ensure that I notify the Installation Pass & ID Office of any change in my status as a sponsor or any knowledge of misuse of the pass to be issued. It is my responsibility to ensure that the pass is returned to the Installation Pass & ID Office if it is not renewed, upon termination of employment or services being provided; or for short term visitors or personal service employees, prior to my DEROS. Failure to comply with these requirements may result in adverse administrative or legal action against me.											
15. SPONSOR SIGNATURE										DATE	

SECTION II - TO BE FILLED OUT BY DOD SPONSOR											
APPLICANT NAME (LAST, FIRST, MIDDLE)		KID/SSN OR PASSPORT									
16. GRADE/RANK	17. JOB TITLE	18. DATE OF EMPLOYMENT									
19. UNIT/AGENCY/COMPANY ADDRESS/PHONE NUMBER		20. CONTRACTING OFFICER / PHONE NUMBER									
		21. CONTRACT NUMBER									
		22. CONTRACT PERIOD (YYYYMMDD-YYYYMMDD) <div style="text-align: center;">TO</div>									
SECTION III – REQUESTING AUTHORITY											
I HAVE REVIEWED THIS APPLICATION AND ITS SUPPORTING DOCUMENTATION AND I AFFIRM IT MEETS THE PROVISIONS OF USFKI 5200.08.		SIGNATURE, TYPED NAME, GRADE, & DUTY TITLE									
SECTION IV – TO BE FILLED OUT BY PASS & ID OFFICE											
23. CRIMINAL HISTORY CHECK WITHIN LAST 3 YEARS? YES NO <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> 23.a. USFK Law Enforcement 23.b. KNP 23.c. NCIC </div> <div style="width: 35%; text-align: center;"> <table style="margin: auto;"> <tr> <td style="padding: 5px;">Requested</td> <td style="padding: 5px;">Completed</td> </tr> <tr> <td style="padding: 5px;">_____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">_____</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="padding: 5px;">_____</td> <td style="padding: 5px;">_____</td> </tr> </table> </div> </div>		Requested	Completed	_____	_____	_____	_____	_____	_____	24. DEROGATORY INFORMATION YES NO (If Yes) Date Provided Approval Authority <hr/> 25. ALL REQUIRED SUPPORTING DOCUMENTATION ATTACHED AND CURRENT? <div style="text-align: right;">YES NO</div>	
Requested	Completed										
_____	_____										
_____	_____										
_____	_____										
26. DATE PASS ISSUED		27. PASS EXPIRATION DATE									
I HAVE REVIEWED THIS APPLICATION TO ENSURE INFORMATION AND DOCUMENTATION REQUIRED FOR AN APPROVAL DETERMINATION ARE ENCLOSED AND IAW USFKI 5200.08.											
28. SIGNATURE OF PASS & ID SECTION CHIEF OR NCOIC			DATE								
SECTION V – APPROVAL AUTHORITY											
I HAVE REVIEWED THIS APPLICATION AND ITS SUPPORTING DOCUMENTATION AND I AFFIRM IT MEETS THE PROVISIONS OF USFKI 5200.08. <div style="display: flex; justify-content: space-around; width: 100%;"> Approved Disapproved </div>		SIGNATURE, TYPED NAME, GRADE, & DUTY TITLE									
PRIVACY ACT STATEMENT											
<p>1. AUTHORITY: Title 10, USC, 3012(g).</p> <p>2. PRINCIPAL PURPOSE(S): Use of social security number or Korean identification number is an additional means of identification of individuals.</p> <p>3. ROUTINE USES: An individual's social security number or Korean identification number, together with name and other personnel identifying data, may be used for the collection of derogatory information on file within DOD, host nation, and other law enforcement agencies in determining an individual's suitability for access to USFK installations in Korea.</p> <p>4. MANDATORY OR VOLUNTARY DISCLOSE AND EFFECT ON INDIVIDUALS NOT PROVIDING INFORMATION: Disclosure of information is voluntary. Failure to provide required data may result in denial of access to USFK installations.</p>											

**INSTRUCTIONS FOR COMPLETING
USFK FORM 82 APPLICATION FOR ORGANIZATION-SPONSORED INSTALLATION/BASE ACCESS PASS**

SECTION I - Sponsor or Applicant will:

1. NAME (Name information must match national registry, ex. SSN/KID Administrations)
2. SEX (Check appropriate block)
3. KID/SSN or Passport # (Input correct numbers/information); Input applicant's current nationality
4. DOB (4 DIGIT year, month, date format, ex. 19751005)
5. Height (Use inches)
6. Weight (Use pounds)
7. Hair Color
8. Eye Color
9. Glasses, YES or NO (Indicate contacts if worn)
10. POB (ex. Seoul, Korea or Atlanta, GA USA)
11. Current address in Korea (Full civilian off-post address; if DOD, full APO address)
12. Access requirements:

12.a. Input access area (EX. Humphreys, Osan, 8A-Wide, etc). Must be specific & for official duty only

NOTE: Request for USFK or 8A - wide Access require approval from the USFK Chief of Staff (CoS). Request for this type of access will be forwarded through the CFC/USFK Provost Marshal Office, Security Division (FKPM-S), for processing and submission to the USFK CoS or 8A Commander/delegated authority.

12.b.c.d.e.f. Input desired FPCON, HPCON, escort privilege, time and days access is required.

12.g.h. Select type of pass based on the status of the applicant; indicate initial, renewal or update of desired pass.

(Include photocopy of current pass, KID card or passport photo page.)

12. i. If the applicant occupies a mission essential position, check YES and enter his/her duty position number as shown on his/her position description. Failure to provide this data may result in rejection of the mission essential person's access to installation(s) during transition to emergency condition and thereafter.

13. Sponsor Information. (Provide all required information)

14. JUSTIFICATION: Provide detailed information that supports that type of access requested. List specific locations and frequency of access (ex. Travel to Cp Walker, Cp Casey, and Osan AB 2 X weekly to deliver supplies) **SPONSOR WILL READ and SIGN STATEMENT OF UNDERSTANDING.**

SECTION II - DOD SPONSOR will:

16. Provide current grade/rank of applicant
- 17, 18. Provide official job title and date began employment/duty with USFK
19. Input official unit or civilian agency address and telephone number. (Use USFK APO or local Korean address)
- 20 - 22. (This information is required data for all contractor applicants.)

(If applicant is a contractor, SF Forms 26 and 30 or USFK Form 175-R MUST be submitted with this application)

SECTION III - REQUESTING AUTHORITY will:

Indicate APPROVE OR DISAPPROVE and sign USFK Form 82 in section III.

SECTION IV - PASS & ID Office or PMO will:

- 23 - 25. Review application and supporting documents. Answer YES or NO. Input correct dates regarding criminal history checks and pass issue data.
- 26 - 27. Annotate pass issued date and expiration date when the pass is issued to the applicant.
28. Signature of Pass & ID Section Chief or NCOIC that reviewed of application for completeness. If not, return the application packet to obtain missing information or documentation.

SECTION V - APPROVING AUTHORITY will:

Indicate **APPROVE OR DISAPPROVE** and sign USFK Form 82 in section V.