

Requesting a new Army Law Enforcement Reporting Tracking System (ALERTS) Account

Prior to requesting an ALERTS live or training account you must have completed the top portion and Part I (blocks 1-12) of DD Form 2875 to digitally upload prior to requesting an account

SYSTEM AUTHORIZATION ACCESS REQUEST (SAAR)			
PRIVACY ACT STATEMENT			
AUTHORITY: Executive Order 10450, 9397; and Public Law 99-474, the Computer Fraud and Abuse Act. PRINCIPAL PURPOSE: To record names, signatures, and other identifiers for the purpose of validating the trustworthiness of individuals requesting access to Department of Defense (DoD) systems and information. NOTE: Records may be maintained in both electronic and/or paper form. ROUTINE USES: None. DISCLOSURE: Disclosure of this information is voluntary; however, failure to provide the requested information may impede, delay or prevent further processing of this request.			
TYPE OF REQUEST <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> MODIFICATION <input type="checkbox"/> DEACTIVATE <input type="checkbox"/> USER ID DODI# _____		DATE (YYYYMMDD) _____	
SYSTEM NAME (Platform or Applications) Army Law Enforcement Reporting Tracking System (ALERTS) Training Site		LOCATION (Physical Location of System) Fort Leonard Wood, MO	
PART I (To be completed by Requestor)			
1. NAME (Last, First, Middle Initial)		2. ORGANIZATION	
3. OFFICE SYMBOL/DEPARTMENT		4. PHONE (DSN or Commercial)	
5. OFFICIAL E-MAIL ADDRESS		6. JOB TITLE AND GRADE/RANK	
7. OFFICIAL MAILING ADDRESS		8. CITIZENSHIP <input type="checkbox"/> US <input type="checkbox"/> FN <input type="checkbox"/> OTHER	9. DESIGNATION OF PERSON <input type="checkbox"/> MILITARY <input type="checkbox"/> CIVILIAN <input type="checkbox"/> CONTRACTOR
10. IA TRAINING AND AWARENESS CERTIFICATION REQUIREMENTS (Complete as required for user or functional level access.) <input checked="" type="checkbox"/> I have completed Annual Information Awareness Training. DATE (YYYYMMDD) _____			
11. USER SIGNATURE		12. DATE (YYYYMMDD)	
PART II - ENDORSEMENT OF ACCESS BY INFORMATION OWNER, USER SUPERVISOR OR GOVERNMENT SPONSOR (If Individual is a contractor - provide company name, contract number, and date of contract expiration in Block 15.)			
13. JUSTIFICATION FOR ACCESS			
14. TYPE OF ACCESS REQUIRED: <input type="checkbox"/> AUTHORIZED <input type="checkbox"/> PRIVILEGED			
15. USER REQUIRES ACCESS TO: <input type="checkbox"/> UNCLASSIFIED <input type="checkbox"/> CLASSIFIED (Specify category) <input type="checkbox"/> OTHER _____			
16. VERIFICATION OF NEED TO KNOW I certify that this user requires access as requested. <input type="checkbox"/>		16a. ACCESS EXPIRATION DATE (Contractors must specify Company Name, Contract Number, Expiration Date. Use Block 27 if needed.)	
17. SUPERVISOR'S NAME (Print Name)	18. SUPERVISOR'S SIGNATURE	19. DATE (YYYYMMDD)	
20. SUPERVISOR'S ORGANIZATION/DEPARTMENT	20a. SUPERVISOR'S E-MAIL ADDRESS	20b. PHONE NUMBER	
21. SIGNATURE OF INFORMATION OWNER/OPR		21a. PHONE NUMBER	21b. DATE (YYYYMMDD)
22. SIGNATURE OF IA/O OR APPOINTEE	23. ORGANIZATION/DEPARTMENT	24. PHONE NUMBER	25. DATE (YYYYMMDD)

DD FORM 2875, AUG 2009

PREVIOUS EDITION IS OBSOLETE.

Adobe Designer 9.0

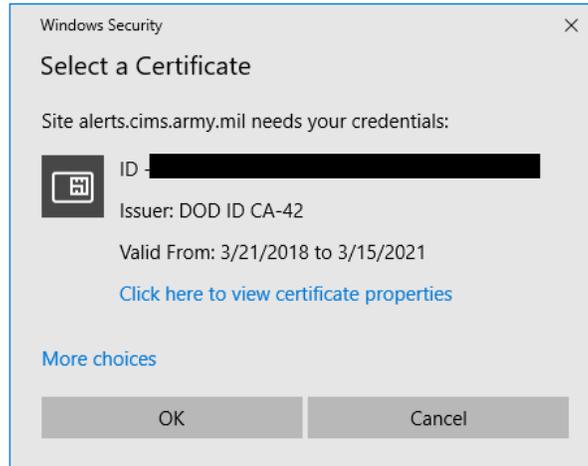
Requesting Access to ALERTS

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1. Once you have your completed/signed DD FM 2875 log onto the ALERTS TRAINING website

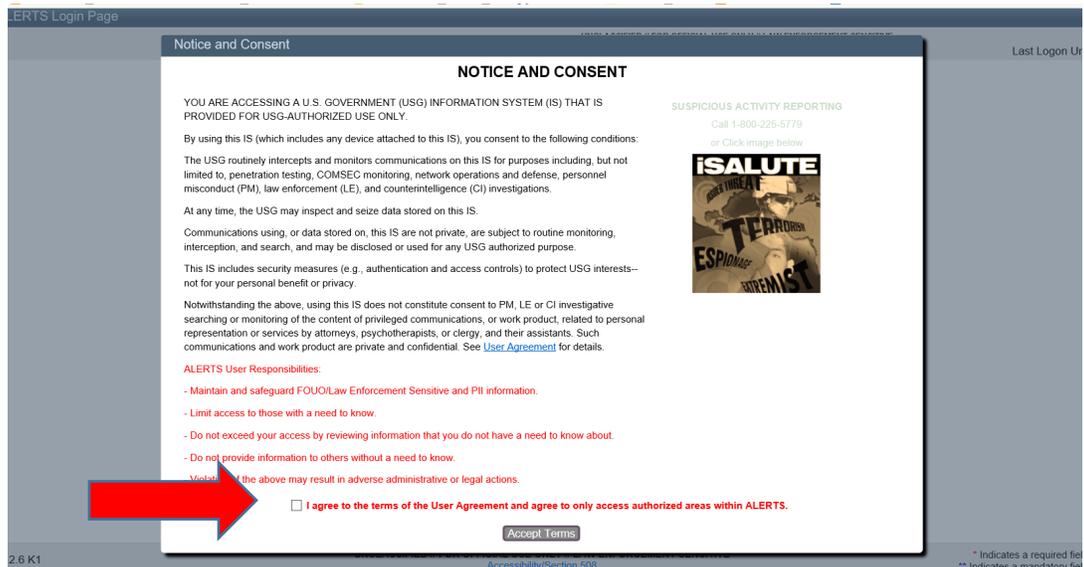
<https://alertstrain.cims.army.mil>

2. The below window will appear. Select “More choices” and select the DOD EMAIL CA-42 Signature.



3. Select OK. Enter your CAC PIN

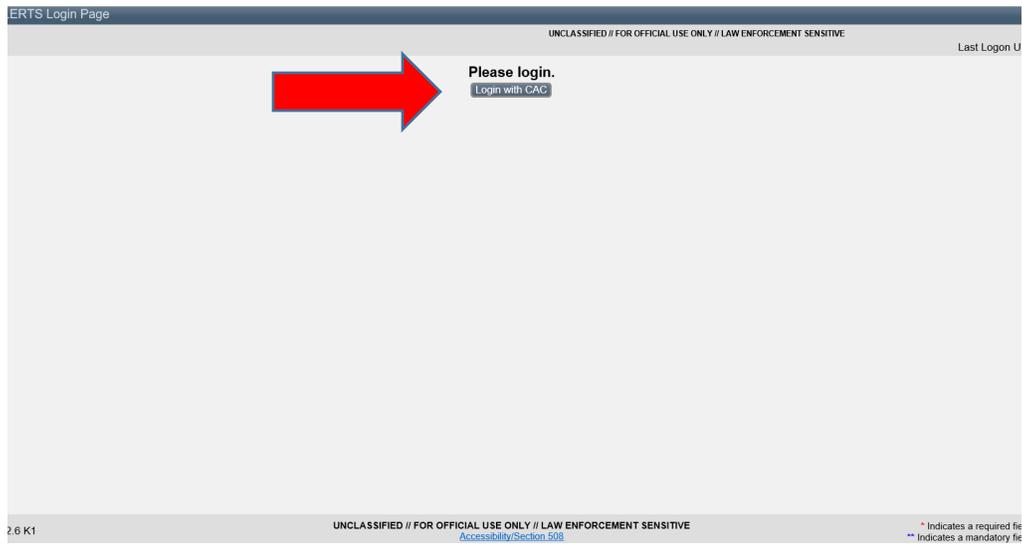
4. The below Screen will appear. Read the Notice and Consent.



5. Click on the box next to “I agree to the terms of the User Agreement and agree to only access authorized areas within ALERTS.” Click on “Accept Terms”

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6. On the next screen click on “Login with CAC”



7. On the next screen complete at a minimum all the required fields marked with a * and ** that have not already been pre-filled for you in the [-] User information window.

Note: For User Type you will need to pick “Police”.

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8. Upload a digital copy of your completed DD FM 2875 by clicking “Browse...”. Chose the file on your computer that is the completed DD FM 2875. Click on “open” then Click on “Upload” on the screen.

9. Once you have completed all fields in the User Information and have uploaded your DA FM 2875, click on the “Request Account” button on the bottom right of the screen. If you’re given the option to choose an installation, one of those installations must be Fort Leonard Wood for training.

10. You should see a screen that your account is pending approval. If you have an ALERTS Administrator located at your home station they will be able to approve your account. If you do not have an ALERTS administrator, once you arrive for training an ALERTS administrator will approve your account.

NOTE: All students that are requesting an account need to bring a current (dated NLT 365 days from date of training) digital or paper copy of their DOD Cyber Awareness Training Certificate with them to class to verify with the instructor.

The training is available at <https://cs.signal.army.mil/login.asp>. Log in utilizing your CAC, complete the course and print your certificate as an Adobe PDF.

Certificate of Training, DA Form 87 Page 1 of 1



DEPARTMENT OF THE ARMY
CERTIFICATE OF TRAINING

This is to certify that

has successfully completed

Cyber Awareness Challenge Training 2019
2 Hour(s)

U.S. Army Signal Center
Given at Fort Gordon, GA

21 March 2019

P.K. Sayles
P.K. SAYLES
COL, SC
Assistant Commandant

DA Form 87, 1 Oct 78

Any questions please contact one of the ALERTS instructors at

usarmy.leonardwood.mp-schl.mbx.alerts@mail.mil