

SECURITY CLEARANCE INFORMATION REQUEST

Privacy Act Data found on this form will be safeguarded

Please complete the following form to request access to the Questionnaire for National Security Positions (SF-86) on line. This information is mandatory; failure to complete this form will result in the job offer being withdrawn as a security clearance is required. This form is to be completed and emailed back to the Human Resources Office within 3 calendar days of receipt.

Please TYPE your full legal name, first name, full middle name, and last name as documented on your birth certificate or court order. If you are a "Jr.," "Sr.," "II" etc., please include. Please DO NOT handwrite your information.

Full Legal Name (please use full middle name, no initials)

E-Mail Address: _____

Daytime Phone Number (include area code): _____

Social Security Number: _____

Are you a U.S. Citizen? Yes No

Date of Birth: _____

State of Birth: _____ Country of Birth: _____

Signature

Date

****NOTE:** Please ensure you check your email daily for the subject line of "Security Clearance Questionnaire" invitation request, which will come from a navy.mil address to access the Questionnaire for National Security Positions (SF-86) on line.

When logging into the form your SSN is required, but be assured it is on an https secure site and the numbers will be obscured when typing it in.

Failure to return this form may result in your offer being withdrawn.

Privacy Act - 1974 As amended applies. This form may contain information which must be protected IAW DoD 5400.11R, and is For Official Use Only – Privacy Sensitive
Any misuse or unauthorized disclosure may result in both civil and criminal penalties