

FOR OFFICIAL USE ONLY

REQUEST FOR FOREIGN NATIONAL UNOFFICIAL VISITS
ABOARD NAS JACKSONVILLE

- 1. Date Submitted: _____
- 2. Sponsor submitting request:

- 3. Point of Contact knowledgeable of the visit, including telephone numbers and e-mail:

- 4. Visitor's name and rate/rank (if applicable):

- 5. Date and place of birth: _____
- 6. Citizenship: _____
- 7. Passport or identification number: _____
- 8. Copy of Passport provided: YES___ / NO___
- 9. Date(s) and time(s) of proposed visit:

- 10. Lodging on base: YES___ / NO___
 - a. Greater than 14 days: YES___ / NO___
 - b. Housing letter approved (greater than 14 days): YES___ / NO___
- 11. Specific purpose of visit: _____

MARY D. JANE, CSCS, USN
SIGNATURE OF SPONSOR

Copy to: NCIS

APPROVED / DISAPPROVED

NAS JAX CO/XO/AO/SECURITY MANAGER/DATE

Privacy Act of 1974, as amended, applies. This form may contain information that must be protected in accordance with 5 U.S.C.s 552a, as implemented within the DOD by 32 C.F.R. Part 310 and DoD 5400,11R and with the Department of the Navy by SECNAVINST 5211.5D.