Boise Airport

Badge Number

Date Issued

Non SIDA AOA Access Badge

AOA Walking Only (Revised September 12, 2016)

Training Date



Ops Initials

Type Test & No.

FOR OFFICIAL USE ONLY

Expiration Date

	DATE	INIT			DATE	INIT
Accounting Form Received & Reviewed			Verify the Training date for the Company Signatory Individual. Within 1Yr			
Received/ Reviewed Application			Security Threat Assessment			
Appropriate Forms of Identification (As per the "List of Acceptable			SENT	RECEIV	Τ	
No Fly List/Selectee List Checked			Notification (Name:		DATE	INIT
SECTION I - APPLICANT DATA)		
NAME:				HOME: Are	a Code ()
NAME:						
ADDRESS:(NUMBER)	(STREET)		(APT)	WORK: Are	ea Code ()
(NONDER)	(OTREET)		(111 1)	PHONE: (_)
CITY:	ST:	7	ZIP:			
CITIZENSHIP:(COUNT	RY)		_	PLACE OF (State o	BIRTH or Country) _	
SOCIAL	X1)					
SECURITY NO:				Gl	ENDER _	
DATE			DDIVED:C	LICENSE ST	ГАТЕ	
OF BIRTH: (MONTH) (DAY) (YEAR)		DRIVER'S LICENSE STATE				
EMPLOYER:		DRIVER'S LICENSE NUMBER				
(IF APPLICABLE	E)					
AIRCRAFT#			PILOT'S L —	ICENSE NUI	MBER	
REASON FOR ACCESS			AIRCRAF	Γ LOCATION	N	

Passport Information – US or Foreign National		US Citizens , Non-US Country of Birth			
Issuing Country		Certificate of Naturalization Number (former ARN)			
Passport Number		Certification of Birth Abroad (Form DS-1350)	Attached Yes No No		
INFORMATION TO BE FILLED OUT BY FOREIGN NATIONALS					
Alien Regist	ration Number (if applicable)				
Non-Immigrant Visa Number (if applicable)					
I-94 Arrival/	Departure Form Number				

Privacy Act Notice

Authority: 49 U.S.C. §§114, 44936 authorizes the collection of this information.

Purpose: The Department of Homeland Security (DHS) will use the biographical information to conduct a security threat assessment to evaluate your eligibility for the program to which you are applying. Your fingerprints and associated information/biometrics will be provided to the Federal Bureau of Investigation (FBI) for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories). The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI. DHS will also transmit the fingerprints for enrollment into the US-VISIT's Automated Biometrics Identification System (IDENT). If you provide your Social Security Number (SSN), DHS may provide your name and SSN to the Social Security Administration (SSA) to compare that information against SSA's records to ensure the validity of your name and SSN.

Routine Uses: This information may be shared with third Parties during the course of a security threat assessment, employment investigation, or adjudication of a waiver or appeal request to the extent necessary to obtain information pellinent to the assessment, investigation, or adjudication of your application or in accordance with the routine uses identified in the Transportation Security Threat Assessment System (T-STAS), DHS/TSA 002. For as long as your fingerprint's and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent or without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses.

Disclosure: Furnishing this information (including your SSN) is voluntary; however, if you do not provide your SSN or any other information requested, DHS may be unable to complete your application for identification media.

I have read and understand the Privacy Act Statement.	
·	Printed Name
Date	Signature

SOCIAL SECURITY AUTHORIZATION STATEMENT.

"I authorize the Social Security Administration to release my Social Security Number and full name to the transportation Security Administration, Office of Transportation Threat Assessment and Credentialing (TTAC), Attention: Aviation Programs (TSA-10)/Aviation Worker Program, 601 South 12th Street, Arlington, VA 22202.

Parent/Guardian Signature:

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1.	This badge is issued for my INDIVIDUAL USE ONLY and I will not under any conditions allow another person to use it.	Initials
2.	ALL badges remain the property of the Boise Air Terminal and MUST BE RETURNED to the airport upon demand, resignation, termination, or at any time access is no longer required. The airport will assess a \$100 fee for each badge that isn't returned.	
3.	If the badge is lost or stolen, I will immediately notify the Airport Badging Office /Airport Operations, and apply for a replacement. A fee of \$25.00 for the 1 st occurrence, \$50.00 for the 2 nd occurrence, and \$75.00 for the 3 rd occurrence will be charged. I will retake the computer based training each time I have a lost badge.	
4.	Any changes made to the initial issuance of the SIDA badge will result in a Badge Change Fee of \$25. This will include badges that have escort privileges added, driver's license added, etc. In other words, anything changed, that is within control of the badge holder/employer, will be assessed the fee.	
5.	Any violation of the Airport rules and regulations, or the Airport Security Program, may result in suspension, revocation, and/or denial of the Boise Air Terminal Non-SIDA AOA Access Badge.	
6.	I certify that I will comply with the rules governing the issuance, use, display, and surrender of this Non-SIDA AOA Access Badge.	
7.	I understand that failure to comply with Boise City Rules and Regulations may result in fines being imposed by the DHS/TSA under 49 CFR Part 1542 in addition to any enforcement actions taken by the Boise City Airport.	
8.	I have been briefed that I can make a written request to obtain a copy of the Boise City Airport's Driver's Manual.	
is p	he information I have provided is true, complete correct to the best of my knowledge and be provided in good faith. I understand that a knowing and willful false statement can be pune or imprisonment or both (see Section 1001 of Title 18 of the United States Code)."	
Printe	d FIRST NAME MIDDLE NAME LAST NAME	
	(APPLICANT'S SIGNATURE) (DATE)	

LIST OF ACCEPTABLE DOCUMENTS

LIST A	OR LIST B	ANI	D LIST C
1. U.S. Passport (unexpired)	1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address.		1. Social Security card issued by the Social Security Administration (other than a card stating it is not valid for employment).
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)	2. ID card issued by Federal, State, or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address.		2. Certification of Birth Abroad issued by the Department of State (Form FS-545 or Form DS-1350)
3. An unexpired foreign pass- port with a temporary I-551 stamp.	3. School ID card with a photograph		3. Original or certified copy of a birth certificate issued by a State, county, municipal authority, or outlying possession of the United States bearing an official seal.
4. An unexpired Employment Authorization Document that	4. Voter's registration Card	1	4. Native American tribal document
contains a photograph (Form I-766, I-688, I-688A, I-688B)	5. U.S. Military card or draft record		5. U.S. Citizen ID Card (Form 1-197)
5. An unexpired foreign pass- port with an unexpired Arrival-Departure Record,	6. Military dependent's ID Card		6. ID Card For use of Resident Citizen in the United States (Form I-179)
Form I-94, bearing the same name as the passport and	7. U.S. Coast Guard Merchant Mariner Card		
containing an endorsement of the alien's nonimmigrant status, if that status a	8. Native American tribal document		7. Unexpired employment authorization document issued by DHS (other than those listed
authorizes the alien to work for the employer.	9. Driver's license issued by a Canadian government authority		under List A)
6. TSA Credentials plus TSA Exemption Letter	For persons under the age of 18 who are unable to present a document listed above.		8. TSA Exemption Letter
	1. School record or report card		
	2. Clinic, doctor, or hospital record		
	3. Day-care or nursery school	1	

In addition, <u>Non-US citizens</u> must present an Alien Registration Number or the I-94 Arrival/Departure Form Number. <u>US citizens who were born abroad</u> must provide either a US passport number, Certificate of Naturalization Number or a Certification of Birth Abroad (DS-1350).

record

	SIGNATORY
1.	I certify that the applicant has been advised of the rules governing the issuance, display, and surrender of the Non SIDA AOA Access Badge identification ID as outlined in the Boise Airport Security Program
2.	I certify that the applicant has been instructed in the proper usage of the ID media in accordance with the Boise Airport rules and regulations.
3.	I understand that the company named in this application accepts responsibility to IMMEDIATELY NOTIFY Airport Operations (208-424-5670) when the applicant terminates employment with the company. In accordance with Public Law 110-161, "any employer who employs an employee to whom an airport security badge or other identifier used to obtain access to a secure area of an airport is issued before, on, or after the date of enactment of this paragraph and who does not collect or make reasonable efforts to collect such badges from the employee on the date that the employmentis terminated and does not notify the operator of the airportwithin 24 hoursshall be liable to the government for a civil penalty not to exceed \$10,000." In addition, the airport will assess a \$100 fee for each badge that isn't returned.
4.	I understand that is responsible for any and all violations of
5.	I certify that, as the Signatory Agent for, I have received Signatory Training, within the last 12 months.
SIG	NATORY NAME Position/Title FIRST NAME MIDDLE NAME LAST NAME
SIG	NATURE: Date:
	 The above signature MUST be on the companies Signature Letter which is on file with Airport Badging Office.) This section IS NOT signed by the company Signatory <u>UNTIL</u> he/she reviews the application and ensures that 1) it

(Note 1: The above signature MUST be on the companies Signature Letter which is on file with Airport Badging Office.)
(Note 2: This section IS NOT signed by the company Signatory <u>UNTIL</u> he/she reviews the application and ensures that 1) it is legible, and 2) complies with all requirements as indicated by the attached instruction sheet. Airport Badging reserves the right to refuse to process the application if these requirements are not met.)