

INSTRUCTIONS FOR FILLING OUT
AOA THE BOISE AIR TERMINAL - APPLICATION FOR AOA
NON SIDA AOA ACCESS BADGE

Revised October 19, 2016

NOTE: The application **must be filled out legibly and completely**. If not, the application will not be processed and returned to the applicant.

NOTE: The applicant must bring the application to the Airport Credentialing Office along with identification which establishes identity and employment eligibility. Two forms of ID are required. See the "List of Acceptable Documents" (page 4). Each identification must be from a different list, one of which must be a government issued photo ID. **In addition, Non US citizens must present an Alien Registration Card or the I-94 Arrival/Departure Form. US citizens who were born abroad must provide either a US passport, Certificate of Naturalization or a Certification of Birth Abroad (DS-1350).**

FILLING OUT THE APPLICATION – PAGE 1

COMPANY: Please print the name of the company through whom you will be accessing the AOA below the "Revised 1 October 2010" date.

SECTION 1: APPLICANT DATA

NAME: Please print your **FULL LEGAL NAME**, i.e., Last Name, First Name, Middle Name.

NOTE: If you don 't have a middle name, print "NMI".

ALIASES/NICKNAME: Print all aliases or nicknames, if none, enter "NONE".

ADDRESS: Print full street address to include Apt Number if applicable. **Do Not Use a PO Box Number.**

CITY, ST, ZIP: Self-explanatory.

CITIZENSHIP: You are a citizen of what country? If dual citizenship, indicate both countries.

SOCIAL SECURITY NO: Self-explanatory.

DATE OF BIRTH: Be sure to put the month first followed by the day and year

EMPLOYER: Only print the name of the company IF the company is paying for the badge. Or if you are a member of a flying club, put the name of the Club in this space. Otherwise, leave blank.

AIRCRAFT #: This badge is for the purpose of accessing your aircraft; please annotate the aircraft "N" number. Otherwise, leave blank.

REASON FOR ACCESS Indicate the reason why you will be using this badge, i.e., flying club airplane access, access to work, etc..

HOME PH: Include the area code.

WORK PH: Include the area code. (If you aren't working for a company on the airport, please indicate your cell phone number if you have one.)

PLACE OF BIRTH: Indicate the State where you were born or country if not born in the United States

GENDER: Enter "Male" or "Female".

DRIVER ' S LICENSE STATE: Enter the state that issued you your driver ' s license.

DRIVER ' S LICENSE NUMBER: Ensure you enter the correct number.

AIRCRAFT LOCATION: Enter the location of your aircraft, otherwise, leave blank.

FILLING OUT THE APPLICATION – PAGE 2

Passport Information – US or Foreign National

ISSUING COUNTRY: Self-explanatory

PASSPORT NUMBER: Self-explanatory

US Citizens, Non-US Country of Birth

You must provide one of the following if you are a US Citizen but were born abroad:

- 1. US Passport Number**
- 2. Certificate of Naturalization Number (Former Alien Registration Number)**
- 3. Certification of Birth Abroad (Form DS-1350)**

Note: We must physically see these forms, so bring them in if this is applicable to your situation.

INFORMATION TO BE FILLED OUT BY FOREIGN NATIONALS

You must provide one of the following if you are not a US Citizen:

- 1. ALIEN REGISTRATION NUMBER: If applicable, enter this number, otherwise enter "N/A"**
- 2. NON-IMMIGRANT VISA NUMBER: If applicable, enter this number, otherwise enter "N/A"**
- 3. I-94 Arrival/Departure Form**

Note: We must physically see the form, so bring it with you.

PRIVACY ACT INFORMATION: Print your name, date and sign it

SS AUTHORIZATION STATEMENT: Print your name, date and sign it

FILLING OUT THE APPLICATION – PAGE 3

ITEMS 1-8: Read and initial each item.

CERTIFICATION BLOCK:

Print your full legal name, First Name, Middle Name, Last name. If no middle name enter (NMI). Sign and date it.

FILLING OUT THE APPLICATION – PAGE 4

PAGE FOUR (4) IS A TABLE THAT HAS A LIST OF ACCEPTABLE DOCUMENTS

This table is used to determine which documents are needed in order to establish Identity and Employment Eligibility. If you have any question as to what you need to bring, please the Badging Office before coming in. Due to Homeland Security constraints, if the appropriate documents establishing Identity and Employment Eligibility are not brought in, Badging Office personnel will not be able to process the application.

FILLING OUT THE APPLICATION – PAGE 5

SIGNATORY - *NOTE:* ONLY FOR COMMERCIAL COMPANIES PAYING FOR THE ACCESS BADGE

1. Read and understand items 1-3.
2. Print the company name in both places in item #4 and one place in item #5.
3. Print the full name of the company's signatory agent who will sign the application and His or Her Position/Title.

NOTE: You must be on the company signature letter and have had "Signatory Training" within in the last year in order to sign the application for the company.

4. Please print your FULL name, i.e., First Name, Middle Name, and Last Name.
NOTE: If you don't have a middle name, print (NMI).
5. Indicate your Position/Title.
6. Sign and date on the appropriate lines.



Non SIDA AOA Access Badge

AOA Walking Only
(Revised September 12, 2016)



COMPANY: _____

FOR OFFICIAL USE ONLY

Badge Number	Date Issued	Expiration Date	Training Date	Type Test & No.	Ops Initials

	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 Documents")			SENT	RECEIVED	
				DATE	INIT
No Fly List/Selectee List Checked			Notification (Name: _____)		

SECTION I - APPLICANT DATA

NAME: _____ <small>(LAST NAME) (FIRST NAME) (MIDDLE NAME)</small>	HOME: Area Code (_____)
ALIAS: _____	PHONE: (_____)
ADDRESS: _____ <small>(NUMBER) (STREET) (APT)</small>	WORK: Area Code (_____)
CITY: _____ ST: _____ ZIP: _____	PHONE: (_____)
CITIZENSHIP: _____ <small>(COUNTRY)</small>	PLACE OF BIRTH <small>(State or Country)</small> _____
SOCIAL SECURITY NO: _____	GENDER _____
DATE OF BIRTH: _____ <small>(MONTH) (DAY) (YEAR)</small>	DRIVER'S LICENSE STATE _____
EMPLOYER: _____ <small>(IF APPLICABLE)</small>	DRIVER'S LICENSE NUMBER _____
AIRCRAFT# _____	PILOT'S LICENSE NUMBER _____
REASON FOR ACCESS _____	AIRCRAFT LOCATION _____

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 <input type="checkbox"/> No <input type="checkbox"/>
INFORMATION TO BE FILLED OUT BY FOREIGN NATIONALS			
Alien Registration 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 pertinent 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.

I am the individual to whom the information applies and want this information released to verify that my SSN is correct. I know that if I make any representation that I know is false to obtain information from Social Security records, I could be punished by a fine or imprisonment or both.”

I have read and understand the SS Authorization Statement. Date: _____ Date of Birth: _____

Printed Name

Signature

PARENTAL CONSENT

If under 18 years of age, your parent/guardian must consent to the Department of Homeland Security, Transportation Security Administration, Security Threat Assessment.

Parent/Guardian Print Name: _____ Date: _____

Parent/Guardian Signature: _____

Initials

1. This badge is issued for my **INDIVIDUAL USE ONLY** and I will not under any conditions allow another person to use it. _____
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 1st occurrence, **\$50.00** for the 2nd occurrence, and **\$75.00** for the 3rd 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.** _____

“The information I have provided is true, complete correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement can be punished by fine or imprisonment or both (see Section 1001 of Title 18 of the United States Code).”

Printed FIRST NAME MIDDLE NAME LAST NAME

(APPLICANT'S SIGNATURE)

(DATE)

LIST OF ACCEPTABLE DOCUMENTS

LIST A	OR	LIST B	AND	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 (<i>other than a card stating it is not valid for employment</i>).
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 (<i>Form FS-545 or Form DS-1350</i>)
3. An unexpired foreign passport 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 contains a photograph (Form I-766, I-688, I-688A, I-688B)		4. Voter's registration Card		4. Native American tribal document
5. An unexpired foreign passport with an unexpired Arrival-Departure Record, Form I-94, bearing the same name as the passport and containing an endorsement of the alien's nonimmigrant status, if that status authorizes the alien to work for the employer.		5. U.S. Military card or draft record		5. U.S. Citizen ID Card (<i>Form I-197</i>)
6. TSA Credentials plus TSA Exemption Letter		6. Military dependent's ID Card		6. ID Card For use of Resident Citizen in the United States (<i>Form I-179</i>)
		7. U.S. Coast Guard Merchant Mariner Card		7. Unexpired employment authorization document issued by DHS (<i>other than those listed under List A</i>)
		8. Native American tribal document		8. TSA Exemption Letter
		9. Driver's license issued by a Canadian government authority		
		For persons under the age of 18 who are unable to present a document listed above.		
		1. School record or report card		
		2. Clinic, doctor, or hospital record		
		3. Day-care or nursery school record		

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

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 employment....is terminated and does not notify the operator of the airport....within 24 hours....shall 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.	<p>I understand that _____ is responsible for any and all violations of <small style="text-align: center;">(COMPANY NAME)</small> 49 CFR 1542 involving the use of the Non SIDA AOA Access Badge and that _____ is liable for any and all fines levied by the TSA for these violations. <small style="text-align: center;">(COMPANY NAME)</small></p>
5.	I certify that, as the Signatory Agent for _____, I have received Signatory <small style="text-align: center;">(COMPANY NAME)</small> Training, within the last 12 months.
<p>SIGNATORY NAME _____ Position/Title _____ <small style="text-align: center;">FIRST NAME MIDDLE NAME LAST NAME</small></p>	
<p>SIGNATURE: _____ Date: _____</p>	
<p>(Note 1: The above signature MUST be on the companies Signature Letter which is on file with Airport Badging Office.)</p>	
<p>(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.)</p>	