U.S. ARMY COMBAT CAPABILITIES DEVELOPMENT COMMAND **DATA & ANALYSIS CENTER** EMPLOYEE ID CREDENTIAL REQUEST FORM 1. Last Name: First Name: MI: 2. Social Security No.: 5. Office Symbol: 6. Office Phone No.: 3. Status: 4. Directorate: 8. Work Site: 7. Work Email: 9. Building/Room No.: 13. Place of Birth (City, State, Country): 10. Pay Grade: 11. Country of Citizenship: 12. DOB: State: 14. Home Address Street: City: Zip Code: Country: State: 15. Home Phone No.: 16. Driver's License No .: 17. Height (inc.): 18. Weight (lbs.): 19. Hair Color: 20. Eye Color: 21. Gender: 22. Contractor's Company Name, 23. Contract Address and Number: Phone: Contract Expiration: 24. Government needed Credentials: Security Badge CAC 25. Security Clearance/ Investigation Verification (To Be Completed by the Security Office): 26. COMPLETED BY ISSUING AUTHORITY Type of Investigation: Card/ Badge Number: ANACI/ Tier 3 Favorable NACI/ Tier 1 BI/ Tier 4 NACLC/ Tier 3 Completed (Date): Issue Date: SSBI/ Tier 5 SSBI-PR/ Tier 5 **Expiration Date:** Remarks: 29. Applicant Signature: DAC POC Signature: 27. DAC POC Name: 28. G2 Official's Name: G2 Official's Signature: Issuing Authority 30. Issuing Authority Name Signature: *** Individuals working on a Classified Contract MAY be required to have the COR attach a copy of the DD Form 254. *** NOTE: DATA REQUIRED BY THE PRIVACY ACT Authority: E.O. 12333, United States Intelligence Activities and Title 10, United States Code, Section 3013, National Security Act of 1947, Defense Authorization Act FY 1988 and 1989. Principle Purpose: To provide the commanders and officials with information to make a determination concerning U.S and NON-U.S citizens being granted limited access authorization to DAC facilities and U.S. Defense Information. Your Social Security Number is used as an additional/ alternate means of identification to facilitate Routine Use: To make a determination concerning access to defense facilities and information, and required for background information for evaluation purpose regarding Disclosure: Disclosure of this information is voluntary, however, failure to furnish this information may result in an inadequate determination of proper access authority and subsequent denial of access.