



General Mitchell International Airport

# Federal Bureau of Investigation Criminal History Records Check Application

I understand that the General Mitchell International Airport (MKE), Airport Security Coordinator (ASC) or his or her designee will conduct a fingerprint-based Federal Bureau of Investigation (FBI) Criminal History Record Check (CHRC) in accordance with Title 49 Code of Federal Regulation (CFR), Part 1542, Section 209 (Fingerprint-based Criminal History Records Checks). I further understand that:

1. Prior to making a final decision to deny unescorted access authority, the ASC or his/her designee will inform me that the FBI CHRC disclosed information that would disqualify me from obtaining unescorted access authority. The ASC will provide a copy of my criminal history record received by MKE from the FBI if requested in writing. Written requests should be addressed to AIRPORT SECURITY MANAGER, General Mitchell International Airport, Public Safety & Security Office, 5300 S. Howell Ave, Milwaukee, WI 53207.
2. The Airport Security Manager is my point of contact if I have questions about the results of my CHRC.
3. I may contact the local jurisdiction responsible for the disqualifying information, and the FBI, to complete or correct the information contained in the record before any final access decision if within 30 days after being advised of disqualifying information, I notify the ASC in writing of my intent to correct any information believed to be inaccurate. If no notification is received within 30 days, the ASC may make a final access decision. Upon my notification that a record has been corrected, the ASC must obtain a copy or accept a copy from me, of the revised FBI record or certified true copy of the information from the appropriate court, at no expense to General Mitchell International Airport, prior to making a final decision on access status. I will be notified that a final decision has been made to grant or deny authorization for unescorted access.
4. Criminal history record information provided by the FBI will be used solely for the purposes of access investigation and no person shall disseminate the results of a CHRC to anyone other than authorized representatives, the ASC and myself.
5. The ASC will maintain a written record of the CHRC until 180 days after the termination of my unescorted access authority.
6. TSA regulations impose a continuing obligation to disclose to the ASC if I am convicted of any disqualifying criminal offense that occurs while I have unescorted access authority within 24 hours.

<b>Full Name Print:</b> (Last, First, Middle, Suffix)	
<b>Aliases, Nicknames, and Previous Maiden and/or Married Name(s), If none, mark "NONE"</b> (do not leave blank)	
<b>Place of Birth:</b> (City, State, Country)	
<b>Gender:</b>	<b>Race:</b>
<b>Eye Color:</b>	<b>Hair Color:</b>
<b>Height:</b> (Feet & Inches)	<b>Weight:</b> (Pounds)

THE PRIVACY ACT OF 1974

5 U.S.C 552a(e)(3)

PRIVACY ACT NOTICE

**Authority:** 6 U.S.C. § 1140, 46 U.S.C. §70105; 49 U.S.C. §§ 106, 114, 5103a, 40103(b)(3), 40113, 44903, 44935-44936, 44939, and 46105; the Implementing Recommendations of the 9/11 Commission Act of 2007, §1520 (121 Stat. 444, Public Law 110-53, August 3, 2007); FAA Reauthorization Act of 2018, §1934(c) (132 Stat. 3186, Public Law 115-254, Oct 5, 2018), and Executive Order 9397, as amended.

**Purpose:** The Department of Homeland Security (DHS) will use the biographic information to conduct a security threat assessment. Your fingerprints and associated information 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 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 your fingerprints for enrollment into US-VISIT Automated Biometrics Identification System (IDENT). DHS may provide your name and SSN to the Social Security Administration (SSA) to compare that information against SSA records to ensure the validity of the information.

**Routine Uses:** In addition to those disclosures generally permitted under 5 U.S.C. 522a(b) of the Privacy Act, all or a portion of the records or information contained in this system may be disclosed outside DHS as a routine use pursuant to 5 U.S.C. 522a(b)(3) including 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 TSA system of records notice (SORN) DHS/TSA 002, Transportation Security Threat Assessment System. For as long as your fingerprints and associated information 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:** Pursuant to §1934(c) of the FAA Reauthorization Act of 2018, TSA is required to collect your SSN on applications for Secure Identification Display Area (SIDA) credentials. For SIDA applications, failure to provide this information may result in denial of a credential. For other aviation credentials, although furnishing your SSN is voluntary, if you do not provide the information requested, DHS may be unable to complete your security threat assessment.

**Certification:** I authorize the Social Security Administration to release my Social Security Number and full name to the Transportation Security Administration, Intelligence and Analysis (IA), Attention: Aviation Programs (TSA-10)/Aviation Worker Program, 601 S. 12th Street, Arlington, VA 20598.

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.

<b>Full Name Print:</b> (Last, First, Middle, Suffix)	
<b>Social Security Number:</b>	<b>Date of Birth:</b> (mm/dd/yyyy)
<b>Signature:</b>	<b>Date:</b> (mm/dd/yyyy)

**DISQUALIFYING CRIMES:** Have you ever been convicted or found “Not Guilty By Reason of Insanity,” in any jurisdiction during the 10 years prior to the date of this application for unescorted access authority of any of the following crimes:

<input type="checkbox"/> YES <input type="checkbox"/> NO	Forgery of certificates, false marking of aircraft, and other aircraft registration violation; 49 USC 46308	<input type="checkbox"/> YES <input type="checkbox"/> NO	Rape or aggravated sexual abuse
<input type="checkbox"/> YES <input type="checkbox"/> NO	Interference with air navigation; 49 USC 46308	<input type="checkbox"/> YES <input type="checkbox"/> NO	Unlawful possession, use, sale, distribution or manufacture of an explosive or weapon.
<input type="checkbox"/> YES <input type="checkbox"/> NO	Improper transportation of hazardous materials; 49 USC 46312	<input type="checkbox"/> YES <input type="checkbox"/> NO	Extortion
<input type="checkbox"/> YES <input type="checkbox"/> NO	Aircraft Piracy; 49 USC 46502	<input type="checkbox"/> YES <input type="checkbox"/> NO	Armed or felony unarmed robbery
<input type="checkbox"/> YES <input type="checkbox"/> NO	Interference with flight crew members or flight attendants; 49 USC 46504	<input type="checkbox"/> YES <input type="checkbox"/> NO	Distribution of, or intent to distribute, a controlled substance
<input type="checkbox"/> YES <input type="checkbox"/> NO	Commission of certain crimes aboard aircraft in flight; 49 USC 46506	<input type="checkbox"/> YES <input type="checkbox"/> NO	Felony arson
<input type="checkbox"/> YES <input type="checkbox"/> NO	Carrying a weapon or explosive aboard aircraft; 49 USC 46505	<input type="checkbox"/> YES <input type="checkbox"/> NO	Felony involving a threat
<input type="checkbox"/> YES <input type="checkbox"/> NO	Conveying false information and threats; 49 USC 46507	<input type="checkbox"/> YES <input type="checkbox"/> NO	Felony involving willful destruction of property
<input type="checkbox"/> YES <input type="checkbox"/> NO	Aircraft piracy outside the special aircraft jurisdiction of the United States; 49 USC 46502(b)	<input type="checkbox"/> YES <input type="checkbox"/> NO	Felony involving importation or manufacture of a controlled substance
<input type="checkbox"/> YES <input type="checkbox"/> NO	Lighting violations involving transporting controlled substances; 49 USC 46315	<input type="checkbox"/> YES <input type="checkbox"/> NO	Felony involving burglary
<input type="checkbox"/> YES <input type="checkbox"/> NO	Unlawful entry into an aircraft or airport area that serves air carriers or foreign air carriers contrary to Established security requirements; 49 USC 46314.	<input type="checkbox"/> YES <input type="checkbox"/> NO	Felony involving theft
<input type="checkbox"/> YES <input type="checkbox"/> NO	Destruction of an aircraft or aircraft facility; 18 USC 32	<input type="checkbox"/> YES <input type="checkbox"/> NO	Felony involving dishonesty, fraud or misrepresentation
<input type="checkbox"/> YES <input type="checkbox"/> NO	Murder	<input type="checkbox"/> YES <input type="checkbox"/> NO	Felony involving possession or distribution of stolen property
<input type="checkbox"/> YES <input type="checkbox"/> NO	Assault with intent to murder	<input type="checkbox"/> YES <input type="checkbox"/> NO	Felony involving aggravated assault
<input type="checkbox"/> YES <input type="checkbox"/> NO	Espionage	<input type="checkbox"/> YES <input type="checkbox"/> NO	Felony involving bribery
<input type="checkbox"/> YES <input type="checkbox"/> NO	Sedition	<input type="checkbox"/> YES <input type="checkbox"/> NO	Felony involving illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than 1 year.
<input type="checkbox"/> YES <input type="checkbox"/> NO	Kidnapping or hostage-taking	<input type="checkbox"/> YES <input type="checkbox"/> NO	Violence at international airports; 18 USC 37
<input type="checkbox"/> YES <input type="checkbox"/> NO	Treason	<input type="checkbox"/> YES <input type="checkbox"/> NO	Conspiracy or attempt to commit any of the criminal acts listed in this section.
<input type="checkbox"/> YES <input type="checkbox"/> NO	Or any other crime classified as a felony that the Administrator determines indicates a propensity for placing contraband aboard an aircraft in return for money; violence at international airports; conspiracy or attempt to commit any of the criminal acts listed in 49 CFR and 1542.209(d) or 49 CFR and 1544.299(d).		

**STATEMENT OF CERTIFICATION:** The information I have provided on this application is true, complete, and correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement on this application can be punished by fine or imprisonment or both. (See section 1001 of Title 18 United States Code.) I must disclose to the Airport Security Coordinator if I am convicted of any disqualifying criminal offense that occurs while I have unescorted access authority within 24 hours. I certify that I have not been convicted or found “Not Guilty By Reason of Insanity,” in any jurisdiction during the 10 years prior to the date of this application for unescorted access authority.

**PRINT NAME:**

**SIGNATURE:**

**DATE:**

**FOR DEPARTMENT USE ONLY**

Government Issue, Photo ID:

Second form of government issued ID:

Date Fingerprinted:

Trusted Agent Initials:

DAC Case#:

Date