

**FOR OFFICIAL USE ONLY**

**CRIMINAL BACKGROUND CHECK INFORMATION**

ENSURE DATA IS LEGIBLE AND COMPLETE, THIS FORM MUST BE COMPLETED BY APPLICANT

<b>LAST NAME:</b>	<b>FIRST NAME, MIDDLE INITIAL:</b>
<b>SSN:</b>	<b>DOB:</b> <b>RACE:</b> <b>SEX:</b> <b>EYES:</b> <b>HT:</b> <b>WT:</b>
<b>ADDRESS, CITY, AND ZIP:</b>	<b>US CITIZENSHIP:</b> <b>YES</b> <b>NO</b>
<b>DRIVER'S LICENSE NUMBER AND STATE OF ISSUE:</b>	<b>AGE 18 OR OVER:</b> <b>YES</b> <b>NO</b>

**EMPLOYER:**  
Sandia National Laboratories

**Any Alias:**

I authorize the use of and release of my personal information to KIRTLAND AFB, NM, to accomplish a National criminal background check. I understand the information obtained will be used to determine my eligibility to access Kirtland AFB for the purpose of employment. Furthermore, I certify the information I have provided is true and that any attempt on my behalf to provide incorrect or misleading information may subject me to denial of base access and/or prosecution under state and/or federal laws.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date

**DO NOT WRITE BELOW – GOVERNMENT USE ONLY**

<p><b>SFS USE ONLY:</b></p> <p><b>SFMIS CHECKS:</b> COMPLETED: Y / N      INITIALS: _____</p> <p><b>NCIC III CHECK:</b> COMPLETED: Y / N</p> <p>Date Completed: _____</p> <p>Disqualifying Factors Y / N      INITIALS: _____</p> <p><b>SFA/FINGERPRINTS:</b> COMPLETED: Y / N      INITIALS: _____</p> <p><b>DRIVERS LICENSE:</b> CHECK Y / N      INITIALS: _____</p>	<p align="center"><u>Remarks</u></p>
---	--------------------------------------

WARNING: This document contains For Official Use Only (FOUO) and Privacy Act information which must be protected or removed IAW AFI 33-119, AFI 33-129, AFI 33-219, AFI 33-332, and DOD Regulation 5400.7/AF Supplement prior to further disclosure.