SECURITY ACCESS REQUEST

(See Instructions to complete form)

Hanford ID (HID):

U.S. Department of Energy, Richland Operations Office

A. CITIZENSHIP:

The Authorized Requester is responsible to ensure the applicant has declared their country of citizenship and for reviewing citizenship validation documents as applicable. **Contact the FNA Program for any non-U.S. Citizen**.

Country of citizenship: _____ Citizenship validated by: Choose One

B. PERSON:

Full Name: _____ Phone: _____

(First, Middle and Last Name)

Home Address: _____ Email: _____

City: _____ State: _____ ZIP: _____ SSN: _____

Place of Birth: _____ Birth Date: _____

(Country/City/State)

Gender: ☐ Male ☐ Female

C. REASON: Choose One

D. ACCESS: Choose One

E. CREDENTIAL TYPE: Choose One

F. CLEARANCE LEVEL: Choose One

Escort Name: _____

G. REQUIRED SITE ACCESS TRAINING *(Consistent with contract agreement and HMIS-STD-TQ-61030)*:

Training Required: ☐ HGET ☐ HSO ☐ BNI GET ☐ Visitor Orientation ☐ Course 120197

To gain access to the HLAN network, new users must complete HGET or Course 120197, *Unclassified Computer Security Awareness*. If Course 120197 is selected for required training, it must be completed prior to submitting the Security Access Request. To register for Course 120197, send an email to ^HUWR Central Administration with the following information:

- Student's Full Name, HID *(or last 4 digits of SSN)*, email address, sponsors name, and course number

H. ACCESS DATES: From: _____ To: _____

I. CONTRACT INFORMATION:

Contract No./Release: _____ Contract End Date: _____

Buyer Tech. Rep. Name: _____ HID: _____ Phone: _____

Hanford Site Manager: _____ HID: _____ CACN: _____

J. COMPANY:

Responsible Company: Choose One

Hanford Company Sponsoring This Request

Employed by Company: _____

Name of Company Awarded Contract (Section J)

_____

Address and Phone Number of Company Awarded Contract

K. PURPOSE/COMMENTS *(i.e. Reason for Access, requirements, assistance required, escort, etc.)*:

L. ISSO SIGNATURE *(Only required for Foreign National HLAN Users)*:

_____ _____

Print First and Last Name *Signature / Date*

M. AUTHORIZED REQUESTER:

Only authorized personnel may request Physical and/or Logical access to Hanford.

_____ _____ _____ _____

HID *Phone* *Print First and Last Name* *Signature / Date*

NOTE: See instructions, as needed, for Security Access Request. ***Status Inquiries - (509) 376-3000 or badge@rl.gov***

OFFICIAL USE ONLY (when filled in)