145 SFS VISITOR'S REQUEST WORKSHEET

AUTHORITY: 10 U.S.C. 8013, DODI 1000.30, AFMAN 31-101 V3, and AFI 33-332
PRINCIPLE PURPOSE(S): To conduct National Crime Information Center (NCIC) check, on non-DoD affiliated civilian visitors. DISCLOSURE: Disclosure of requested information is voluntary. However, failure to provide information may result in access privileges being refused or withdrawn. The Controlled Unclassified Information Statement will apply throughout the duration of the visitor's visit to the 145 AW Installation.

1. INSTRUCTIONS

All information must be completed; First, Middle, and Last Names (no initials). Email worksheet to 145MSG.S5Pass.ID@us.af.mil

SECTION I: Ensure all blocks are complete.

1.1. SPONSOR'S RANK/ NAME	*1.2. SPONSOR'S PHONE NUMBER & UNIT*
MSgt Sarah Marshall	704-391-4109
1.3. VISITORS AFFILIATION	**1.4 VISITOR'S DESTINATION & PURPOSE FOR VISIT**
Construct Security Forces Building/FJRP229030	4930 Minuteman Way/Civil Engineering Bldg #43 (Classroom) Charlotte,NC 28208

Visitor's Information

1.5. NAME *(LAST, FIRST, MIDDLE)*	1.6. SOCIAL SECURITY #	1.7. DL# & STATE	1.8. DOB	1.9. DATES & TIMES	1.10. VETTING RESULTS	1.11. VETTED BY

SECTION II: To be completed, signed, and dated by Security Forces.

2.1. DISTRIBUTION INSTRUCTIONS APPROVED and DENIED ON FITNESS CRITERIA.

Ensure all information is loaded into the Main Gate Database and completed worksheet is sent to the originator, sponsor (if different than the originator), and 145MSG.S5Pass.ID@us.af.mil

2.2. INFORMATION NEEDED FOR DENIAL ON FITNESS CRITERIA AND/OR MISCELLANEOUS COMMENTS, I.E. MAY NOT DRIVE.

Ensure full name, company, and reason for denial is placed below and/or comments if needed:

Date:

INSTRUCTIONS FOR COMPLETING VISITOR REQUEST WORKSHEET

SECTION I TO BE COMPLETED BY SPONSOR:

Block 1.1. Enter the sponsor's Rank/Name and DOD or Social Security Number.

Block 1.2. Enter sponsor's contact number and unit.

Block 1.3. Enter company's name or visitors purpose of visiting 145th AW Installation.

Block 1.4. Enter the visitors allowed destination or destinations by sponsor and a brief description of the visitor's purpose for visit.

Block 1.5. Enter Full Last Name, Full First Name, and Full Middle Name (No Initials).

Block 1.6. Visitor's Social Security Number.

Block 1.7. Enter visitor's issued driver's license or state issued ID number and state of issue.

Block 1.8. Enter visitor's Date of Birth**.**

Block 1.9. Ensure to enter the requested dates and times of the visitor.

(Note: Contractors that will need access for more than 10 cumulative days will need to complete an 145 AW Form 28.)

SECTION 1.10. & 1.11.: TO BE COMPLETED BY SFS:

Block 1.10. Ensure personnel are vetted via NCIC and CJLEADS. Vetting results will be annotated by APPROVED or DENIED.

Block 1.11. SFS personnel conducting the vetting will place their initials in this block.

SECTION II: TO BE COMPLETED, SIGNED, AND DATED BY SFS:

Block 2.1. Ensure all information is loaded into the Main Gate Database and completed worksheet is sent to the originator, sponsor (if different than the originator), and **145MSG.S5Pass.ID@us.af.mil**

Block 2.2. This section will be used to annotate the reason for the denial, if visitor is denied, and/or any other pass-on information on the visitor, i.e. may not drive due to invalid driver's license etc.

(Note: SFS member conducting the vetting will need to sign and date the completed form, Section II, Block 2.2.)