PSIP Required Information Worksheet

PERSON INFORMATION SSN: RANK / PREFIX: LAST NAME: _____ FIRST NAME: ____ MIDDLE NAME: _____ SUFFIX: COUNTRY OF BIRTH: DATE OF BIRTH: _____ STATE OF BIRTH: US CITIZENSHIP: PROOF OF CITIZENSHIP: DOCUMENT NUMBER: **INVESTIGATION INFORMATION** POSITION CURRENT ADDITIONAL DOCUMENT REQUIRED CLEARANCE INVESTIGATION TDA MTOE PD **UPGRADE MILITARY** REQUIRED CLOSED DATE CIVILIAN CONTRACTOR CLEARANCE All TS/SCI Position Upgrade Requests, Require An Upgrade Memorandum Signed By GO/SES. All Upgrade Memorandum will be Concurred or Non-concurred by the Brigade and MIRC Security Managers before being submitted for GO/SES signature. REASON FOR ACCESS: Postion MOS: _____ Position MOS Title:_____ Paragraph/Line Number: SOI: A334 SON: 647J ALC: 00005570 SERVICE / AGENCY: ARMY IT LEVEL: **FINGERPRINTS** DATE SUBMITTED TYPE OF FINGERPRINT TAKEN SUBMITTED: SUBJECT CONTACT INFORMATION DISA E-MAIL ADDRESS: _____ PRIMARY PHONE: _____ SECONDARY E-MAIL ADDRESS: ______ SECONDARY PHONE: _____ UNIT NAME: _____ UNIT UIC: _____ **BDE NAME COMMANDER CONTACT INFORMATION** RANK: FIRST AND LAST NAME: TITLE: DISA EMAIL ADDRESS: ______ PRIMARY PHONE: _____ SECURITY MANAGER CONTACT INFORMATION RANK: FIRST AND LAST NAME: PRIMARY PHONE: DISA EMAIL ADDRESS: BDE SECURITY MANAGER CONTACT INFORMATION RANK: _____ FIRST AND LAST NAME: _____ PRIMARY PHONE: _____ DISA EMAIL ADDRESS:

PSIP APPLICANT AGREEMENT

You also have been briefed and understand the following:

Printed Name	Signature	Date	
	application process. The PSI-CoE help desk number is 410 278-4194 or their email ac usarmy.apg.inscom.mbx.psip-questions@mail.mil. A PSI-CoE customer support center.	stand that I am responsible for contacting the PSI-CoE help desk if I have any problems concerning my tion process. The PSI-CoE help desk number is 410 278-4194 or their email address is .apg.inscom.mbx.psip-questions@mail.mil. A PSI-CoE customer support center representative is available to ou from 0800-2400 Monday- Tuesday; 0800-1800 Wednesday; 0800-1800; 1300-2400 Thursday; 0800-2200 (all times are EST).	
	I understand if I fail to complete my on-line e-QIP form a second time, a memorandum command will be required for me to be re-invited into the e-Qip program again.	from the first 0-6 in my chain of	
	I understand if I fail to complete my on-line e-QIP form, a memorandum from the first 0 be required for me to be re-invited into the e-Qip program again.	0-5 in my chain of command will	
	I understand that I am responsible for submitting all required documents and fingerprin investigation can be released to Office of Personnel Management.	ts to the PSI-CoE before my	
	I understand that I will have 5 days from the date I receive the email from the PSIP Ce the required data & submit the required forms to the PSI-CoE. Failure to meet this sus my chain of command. After 15 days I understand that I will be terminated from the system.	pense will result in notification of	

Privacy Act Statement

The Privacy Act of 1974, Section 552a Title 5, U.S.C., requires that federal agencies inform individuals, at the time information is solicited from them, whether the disclosure is mandatory or voluntary, by what authority such information is solicited, and what uses will be made of the information. You are hereby advised that authority for soliciting your Social Security Account Number (SSN) is Executive Orders 10450, 12333, and 9397. Your SSN will be used to identify you when it is necessary to certify your level of access to classified information in accordance with the Army Personnel Security Program. Although disclosure of your SSN is not mandatory, your failure to do so may impede the processing of such certifications or determinations, or possible result in the denial of your being granted access to classified information.