## CUI (when filled in)

## Instruction for completing the Local Population Access Registration Form

INSTRUCTIONS: Please complete all information in black ink (printed) or by typing. By voluntarily providing your Personal Information, you agree to the following terms and restrictions:

RESTRICTIONS: Local Population Identification Card/Base Access Pass may only be used by person to whom they are issued and for the specific business/purpose issued. Applicants are reminded that soliciting (i.e., door-to-door sales) is prohibited on the base, and that such activity is grounds for cancellation of the Pass Additionally, such action may result in debarment from the base and legal action. The Base Commanding Officer has discretion over specifying the period of validity for any Local Population ID Cards/Base Access Passes that are issued under his/her jurisdiction. Review the Privacy At Statement that is printed at the top of the form

BIOCK 1:	Enter the Last Name
Block 2:	Enter the First Name
Diagle 2.	Cotos the Middle Non

nter the Middle Name

Block 4: If applicable, check the box for Name Suffix.

Block 5: Check the applicable box for Race.

Check the applicable box for Gender. Block 6:

Block 7: Enter Date of Birth. Block 8: Enter City of Birth.

Block 9: Enter State of Birth

Block 10: Enter Country of Birth.

Block 11: Check the applicable box for US Citizenship

Block 12: If not a US Citizen, enter the name of the Country of Citizenship. Block 13: Two forms of identity source documents from the list of acceptable

documents listed below must be presented to the base registrar with this completed form. Check the box for the type of Documents that will be presented for identity proofing. If the document type is not listed, use the two rows under Other Approved Identity Source Documents to enter the type of document(s) that you will present

Block 14: Enter the Document Number located on the Identity Proofing Source document that was checked in Block 13.

Block 15: Enter the State that issued the Identity Source Document.

Block 16: Enter the Country that issued the Identity Source Document.

Block 17: Enter the Date that the Identity Source Document was issued.

Block 18: Enter the Date that the Identity Source Document will expire.

Block 19: Enter Weight in pounds.

Block 20: Enter Height in inches. Block 21: Check the applicable box for Hair Color.

Block 22: Check the applicable box for Eye Color.

Block 23: Enter Home Address Including City, State, Zip Code, and Home Telephone Number

Block 24: Enter Name of Registrant's Base Sponsor and Base Sponsor's Telephone Number

Block 25: Enter Employer Name and address including City, State, Zip Code, and Employer's Telephone Number.

Block 26: Enter Supervisor's Name including City, State, Zip Code, and Supervisor's Telephone Number.

Block 27: Check the applicable box for Work Hours box or check the OTHER box and enter the work hours, then check applicable boxes for Work Days Block 28: Check the applicable answer if you have been convicted of Felony and enter initials.

Block 28 Check the applicable box for felony conviction.

AND

Block 29: Enter initials to accept terms for returning Local Population Identification Card

Block 30: Sign and date the form to attest that the foregoing information is true and complete to best of your knowledge.

LIST OF ACCEPTABLE DOCUMENTS - All documents must not be expired.

Must present one selection from List A or a combination of one selection from List B and one selection from List C.

List A - Documents that Establish Identity and

List B - Documents that Establish Identity

List C - Documents that Establish **Employment Authorization** 

A Social Security Account Number card\_unless

(1) NOT VALID FOR EMPLOYMENT

AUTHORIZATION.

AUTHORIZATION.

State (Form DS-1360).

(2) VALID FOR WORK ONY WITH INS

2. Certification of Birth Abroad issued by the

Department of State (Form FS-545).

Native American tribal document.

U.S. Citizen ID Card (Form I-197)

(3) VALID FOR WORK ONLY WITH DHS

Certification of Birth issued by the Department of

Original or certified copy of birth certificate issued by a State, county, municipal authority or territory of the United States bearing an official seal.

Identification Card for Use of Resident Citizen in

the card includes one of the following restrictions:

**Employment Authorization** 

U.S. Passport or U.S. Passport Card 2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551).

3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa.

4. Employment Authorization Document that contains a photograph (Form I-766).

5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status: a. Foreign Passport; and

b. Form I-94 or Form I-94A that has the following:

(1) The same name as the passport; and

(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with and restrictions or limitations identified on form.

6. Passport from the Federal States of Micronesia (FSM) or the Republic of the Marshal Islands (RM) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United Stated and FSM or RM.

Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as

name, date of birth, gender, height, eye color, and address.

2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address

School ID card with a photograph

Voter's registration card.

U.S. Military card or draft record.

Military dependent's ID card.

U.S. Coast Guard Merchant Mariner Card.

Native American tribal document. 9. Driver's license issued by a Canadian

government authority.

a document listed above:

10. School record or report card.

11. Clinic, doctor, or hospital record. 12 Day-care or nursery school record.

For persons under age 18 who are unable to present

the United States (Form I-179). Employment authorization document issued by the Department of Homeland Security.

The remainder of the form will be completed by the Base Registrar Person conducting Identify Proofing process and NCIC check.

## AGENCY DISCLOSURE STATEMENT:

SECNAV 5512/1 (MAY 2021)

The public reporting burden for this collection of information, OMB 0703-0061, is estimated to average ten (10) minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, Executive Services, at whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil. Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.

## PLEASE DO NOT RETURN RESPONSE TO THE ABOVE ADDRESS.

Responses should be sent to the Base Registrar.

Page 3 of 3