

VISIT REQUEST

(Reference DOD 5200.1-R para 7-104, and 7-105; AFI 31-401, para 7.4; DOD 5220.22R, Section III, Parts 1, 2, and 3; AFI 31-601, Chapter 3. Mark inapplicable items NA. Continue on reverse, identify by number/column.)

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. 8013, Secretary of the Air Force; Powers and Duties; Delegation by.
PRINCIPAL PURPOSE: To identify persons seeking approval to visit Air Force and contractor activities when access to classified information is or might be involved.
ROUTINE USES: Information may be disclosed for any of the routine uses published by the Air Force.
DISCLOSURE IS VOLUNTARY: Failure to provide the information will result in disapproval of visit request.

TO:

FROM:

1. VISIT APPROVAL IS REQUESTED FOR THE FOLLOWING PERSONNEL. VISIT WILL BE CONSIDERED APPROVED UNLESS OTHERWISE NOTIFIED.

| NAME, GRADE, SSN, AND JOB TITLE A | CITIZENSHIP (Alien registration no., if applicable) AND DATE AND PLACE OF BIRTH B | OFFICE/ACTIVITY OF ASSIGNMENT AND ADDRESS C | LEVEL OF CLEARANCE D | LEVEL OF ACCESS E |
|---|--|---|-----------------------------|--------------------------|
| | | | | |
| 2. NAME AND ADDRESS OF ACTIVITY TO BE VISITED | 3. DATE(S) AND DURATION OF VISIT | 4. NAME(S) AND JOB TITLES OF PERSON(S) TO BE VISITED | | |
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| 5. PURPOSE AND JUSTIFICATION FOR VISIT (Include contract number, project, program, if applicable) | | | | |
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6. SPECIAL ACCESS PROGRAM AUTHORIZATIONS (Name and access level of program or project and office or activity granting access)

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| TYPED NAME, GRADE, & TITLE OF CERTIFYING OFFICIAL | SIGNATURE | TELEPHONE NUMBER | DATE (YYYYMMDD) |
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