



Midland International
Air & Space Port

AIRPORT SECURITY IDENTIFICATION BADGE APPLICATION

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FOR QUESTIONS, PLEASE CONTACT THE MAF BADGING OFFICE AT
MAFBADGING@MIDLANDTEXAS.GOV OR CALL (432) 560-2200 EXT. 3006
BADGING FEES AND PENALTIES: <https://www.flymaf.com/184/Badging-Office>

SECTION I – APPLICANT INFORMATION

Must be TYPED

Last Name:		First Name:		Middle Initial	Social Security Number (no dashes):	
Date of Birth: (mm-dd-yyyy)	Gender:	Race:	Hair Color:	Eye Color:	Height:	Weight: lbs
Mailing Address:						
City:		State:		Zip Code:		
Primary Phone Number:		Email Address (Optional):		Names Previously Used on Official Documents:		
Emergency Contact Information: Please use a separate phone number						
Name:		Relationship:		Primary Phone Number:		
Home Address:						
City:		State:		Zip Code:		

SECTION II – CITIZENSHIP INFORMATION

Must be TYPED and, IF REQUIRED, bring the selected original copy of the identification documentation listed below

Country of Citizenship:	State & Country of Birth:
U.S. CITIZEN (Naturalized or Born Abroad) Provide ONE of the following: a. U.S. Passport Number: _____ b. Certification of Naturalization Number (ARN or INS): _____ c. Certificate/Consular of Birth Abroad (Form DS-1350): _____ Non-U.S. Passport Number: _____ Non-U.S. Passport Country: _____	NON-U.S. CITIZEN: Provide at least ONE of the following: a. Non-Immigrant Visa Control Number (top right corner): _____ Country of Passport: _____ Passport Number: _____ b. Alien Registration Number (ARN): _____ c. I-94 Arrival/Departure Form Number: _____

MAF BADGING OFFICE USE ONLY

ADDITIONAL IDENTIFICATION	TYPE:	NUMBER:
Type: BLUE ☐ RED ☐ GREEN ☐ YELLOW ☐ PINK ☐ WHITE ☐ VOLUNTEER ☐		
NEW BADGE ☐ RENEWAL ☐ LOST ID REPLACEMENT ☐ TWO FORMS OF IDENTIFICATION VERIFIED ☐		
BADGE NUMBER:	ISSUE DATE:	EXPIRATION DATE:
CHRC COMPLETE ☐ NA ☐ STA COMPLETE ☐ NA ☐	ISSUED BY: BADGE PIN #	AMOUNT \$
MATRIX: CHRC:	VERIFIED BY: NC ☐ BC ☐ CC ☐ CASH/CHECK →	RECEIPT #

SECTION III – AUTHORIZED SIGNER SECTION

Applicant Information – TO BE FILLED OUT BY AUTHORIZED SIGNER

Company Name:	<u>Applicant</u> Job Title:
Badge Type Requested: ☐ BLUE ☐ RED ☐ YELLOW ☐ GREEN ☐ OTHER:	
Authorized Signer Name-Printed:	Authorized Signer Title:
Email Address:	Phone Number: EXT:

SECTION IV – AUTHORIZED SIGNER AGREEMENT

I hereby certify the above-named applicant is authorized and has a need to obtain a Midland International Air & Space Port Security Identification Badge for use in entering the AOA/Secured Areas and acknowledges their security responsibilities under 49 CFR 1540.105(a). I hereby certify the information above is accurate and appropriate I-9 Documentation will be submitted upon arrival in the AOCC. I hereby state by signing this document that I have undergone said criminal history records check required by the Transportation Security Administration (TSA). I agree to ensure that the ID badge issued to this applicant shall be returned to the AOCC upon termination of the applicant's involvement or transfer to another airport within thirty (30) days or a penalty (link on page #1) will be assessed against the Company of which he/she was employed.

Authorized Signer Signature: _____ **Date:** _____

SECTION V – APPLICANT SIGNATURE

I, the undersigned, acknowledge that the information I have provided is true, complete, and correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement can be punished by fine or imprisonment or both (see Section 1001 of Title 18 of the United States Code). **I understand that Federal regulations under 49 CFR 1542.209 imposes a continuing obligation for me to disclose to the Midland International Air & Space Port within 24 hours if I am convicted of any disqualifying criminal offenses that occur while I have unescorted access authority.** I understand that the ID badge must be displayed, on the outermost garment at waist level or above, at all times while located in the Secured Area. I understand that there is a \$100.00 application fee associated with this badge (which includes the cost for fingerprinting), \$10.00 of which will be refunded upon the return of this badge to the Airport Operations Control Center (AOCC). I also understand that a penalty will be assessed against me if my ID badge is lost or stolen (link on page #1). This badge shall be returned to the AOCC upon my termination or transfer to another airport. I understand that unauthorized use of this badge and/or intentional falsification of required information will subject me to possible criminal prosecution. I hereby acknowledge and agree to disclose any information requested by Airport, Fire Department, or Law Enforcement personnel during any aircraft emergencies, security events, or when damage to City of Midland property occurs, and that the failure to do so may result in the forfeiture of my identification badge. Failure to observe any of the rules or regulations set forth by the Airport Security Program will result in the forfeiture of this identification badge. By signing this document, I also understand that I must adhere to the rules and regulations of the Midland International Air & Space Port Minimum Standards adopted by the Midland City Council on May 10, 2005. Furthermore, I authorize the Social Security Administration to release my Social Security Number and full name to the Transportation Security Administration, Enrollments Services and Vetting Programs, Attention: Vetting Programs (TSA-10)/Aviation Worker Program, 6595 Springfield Center Drive, Springfield, VA 20598-6010. I am the individual to whom the information applies and want this information released to verify that my SSN is correct. I know that if I make any representation that I know is false to obtain information from Social Security records, I could be punished by a fine or imprisonment or both. Any applicant applying for SIDA ID media must provide their SSN, if issued by the U.S. Social Security Administration.

SCREENING NOTICE: Any employee holding a credential granting access to a Security Identification Display Area may be screened at any time while gaining access to, working in, or leaving a Security Identification Display Area.

SSN and Full Name: _____ **Date of Birth:** _____

Applicant Signature: _____ **Date:** _____

SECTION VI – AIRPORT SECURITY IDENTIFICATION BADGE CRIMINAL HISTORY APPLICATION

The Transportation Security Administration TSAR Part 1542 requires that all individuals who apply for unescorted access to an airport's Secured Area undergo a fingerprint-based Criminal History Records Check (CHRC) that does not disclose a disqualifying criminal offense. An individual has a disqualifying criminal offense if the individual has been convicted, or found guilty by reason of insanity, any of the crimes listed below in the past 10 years.

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|--|---|
| 1. Forgery of certificates, false making of aircraft, and other aircraft registration violations | 19. Rape or aggravated sexual abuse |
| 2. Interference with air navigation | 20. Unlawful possession, use, sale, distribution or manufacture of an explosive or weapon |
| 3. Improper transportation of a hazardous material | 21. Extortion |
| 4. Aircraft piracy | 22. Armed or felony unarmed robbery |
| 5. Interference with flight crew members or flight attendants | 23. Distribution of, or intent to distribute, a controlled substance |
| 6. Commission of certain crimes aboard aircraft in flight | 24. Felony arson |
| 7. Carrying a weapon or explosive aboard an aircraft | 25. Felony involving a threat |
| 8. Conveying false information and threats | 26. Felony involving: |
| 9. Aircraft piracy outside the special aircraft jurisdiction of the United States | a. Willful destruction of property; |
| 10. Lighting violations involving transporting controlled substances | b. Importation or manufacture of a controlled substance; |
| 11. Unlawful entry into an aircraft or airport area that serves air carriers or foreign air carriers contrary to established security requirements | c. Burglary; |
| 12. Destruction of an aircraft or aircraft facility | d. Theft; |
| 13. Murder | e. Dishonesty, fraud, or misrepresentation; |
| 14. Assault with intent to murder | f. Possession or distribution of stolen property; |
| 15. Espionage | g. Aggravated assault; |
| 16. Sedition | h. Bribery; or |
| 17. Kidnapping or hostage taking | i. Illegal possession of a controlled substance punishable by a maximum term of more than 1 year. |
| 18. Treason | 27. Violence at international airports; |
| | 28. Conspiracy or attempt to commit any of the aforementioned acts |

I, the undersigned, do not have any of the above disqualifying offenses and I understand that any individual who has been convicted or found not guilty by reason of insanity of the crimes listed above within the previous ten years is legally prohibited from unescorted SIDA access. I understand that Federal regulations under 49 CFR 1542.209 imposes a continuing obligation for me to disclose to the Midland International Air & Space Port within 24 hours if I am convicted of any disqualifying criminal offenses that occurs while I have unescorted access authority. The information I have provided on this application is true, complete, and correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement on this application can be punished by fine or imprisonment or both. (See section 1001 of Title 18 United States Code.)

Applicant Signature: _____ **Date:** _____

CRIMINAL HISTORY RECORDS CHECK (CHRC)

In accordance with the Transportation Security Administration TSAR Part 1542.209, a copy of the criminal record received from the FBI will be provided to an individual only if requested in writing. The Airport Security Coordinator will address any questions concerning the results of the criminal history records check (CHRC). If an individual receives notice that a disqualifying crime was returned from their FBI criminal history records check, and the individual questions the validity of the criminal record, the individual must notify the Midland International Air & Space Port within 30 days in writing of his or her intent to correct any information he or she believes to be inaccurate. If no notification is received from the individual, Midland International Air & Space Port may make the final determination to deny unescorted access authority.

Applicant Signature: _____ **Date:** _____

The Privacy Act of 1974
5 U.S.C. 552a(e)(3)

Privacy Act Notice

Authority: 6 U.S.C. § 1140, 46 U.S.C. § 70105; 49 U.S.C. §§ 106, 114, 5103a, 40103(b)(3), 40113, 44903, 44935-44936, 44939, and 46105; the Implementing Recommendations of the 9/11 Commission Act of 2007, § 1520 (121 Stat. 444, Public Law 110-52, August 3, 2007); and Executive Order 9397, as amended.

Purpose: The Department of Homeland Security (DHS) will use the biographic information to conduct a security threat assessment. Your fingerprints and associated information will be provided to the Federal Bureau of Investigation (FBI) for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems including civil, criminal, and latent fingerprint repositories. The FBI may retain your fingerprints and associated information in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI. DHS will also transmit your fingerprints for enrollment into US-VISIT Automated Biometrics Identification System (IDENT). If you provide your Social Security Number (SSN), DHS may provide your name and SSN to the Social Security Administration (SSA) to compare that information against SSA records to ensure the validity of the information.

Routine Uses: In addition to those disclosures generally permitted under 5 U.S.C. 522a(b) of the Privacy Act, all or a portion of the records or information contained in this system may be disclosed outside DHS as a routine use pursuant to 5 U.S.C. 522a(b)(3) including with third parties during the course of a security threat assessment, employment investigation, or adjudication of a waiver or appeal request to the extent necessary to obtain information pertinent to the assessment, investigation, or adjudication of your application or in accordance with the routine uses identified in the TSA system of records notice (SORN) DHS/TSA 002, Transportation Security Threat Assessment System. For as long as your fingerprints and associated information are retained in NGI, your information may be disclosed pursuant to your consent or without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and the FBI's Blanket Routine Uses.

Disclosure: Furnishing this information (including your SSN) is voluntary; however, if you do not provide your SSN or any other information requested, DHS may be unable to complete your application for a security threat assessment.

Providing Identification

In order to apply for any airport issued identification media, an individual is required to prove his/her identity as well as his/her employment eligibility. This can be accomplished by providing documents as listed on the "List of Acceptable Documents" provided on the following page. See below for situations requiring additional documentation.

For individuals who hold a non-immigrant visa, provide the visa control number, which appears in the top right-hand corner of the visa and is labeled "Control Number."

For Individuals who are U.S. citizens born abroad or naturalized U.S. citizens, please provide:

- 1. U.S. Passport number, or*
- 2. Certificate of Naturalization Number, Form N-550 or N-570, or*
- 3. Certificate of U.S. Citizenship Number, Form N-560 or N-561, or*
- 4. Certification of Report of Birth, Form DS-1350, issued prior to 1990. For purposes of the STA, the form name, that is, DS-1350, must be entered in the submission in lieu of the document control number, or*
- 5. Certification of Report of Birth, Form DS-1350, issued after 1990, which contains a 10-digit document number, beginning with 159 (for example, 159- XXXXXXXX). For purposes of the STA, the document control number must be entered in the submission, or*
- 6. Consular Report of Birth Abroad, Form FS-240, issued prior to 1990. For purposes of the STA, the form name, that is, FS-240, must be entered in the submission in lieu of the document control number, or*
- 7. Consular Report of Birth Abroad, Form FS-240, issued after 1990, which contains a 10-digit document number, beginning with 159 (for example, 159-:XXXXXXXX). For purposes of the STA, the document control number must be entered in the submission, or*
- 8. Certification of Birth Abroad, Form FS-545, issued prior to 1990.*

NOTE: The City of Midland's Department of Airports requires that a minimum of two (2) identification documents be provided before a badge application is processed.

LISTS OF ACCEPTABLE DOCUMENTS

All documents must be UNEXPIRED

Employees may 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 Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity	LIST C Documents that Establish Employment Authorization
		AND	
1. U.S. Passport or U.S. Passport Card		1. 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	1. A Social Security Account Number card, unless the card includes one of the following restrictions:
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)			(1) NOT VALID FOR EMPLOYMENT
3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa		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	(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION
4. Employment Authorization Document that contains a photograph (Form I-766)		3. School ID card with a photograph	2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)
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: i. The same name as the passport; and ii. 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 any restrictions or limitations identified on the form.	OR	4. Voter's registration card	
		5. U.S. Military card or draft record	
		6. Military dependent's ID card	3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
		7. U.S. Coast Guard Merchant Mariner Card	
		8. Native American tribal document	4. Native American tribal document
		9. Driver's license issued by a Canadian government authority	5. U.S. Citizen ID Card (Form I-197)
		For persons under age 18 who are unable to present a document listed above:	6. Identification Card for Use of Resident Citizen in the United States (Form I-179)
6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI			
		10. School record or report card	7. Employment authorization document issued by the Department of Homeland Security
		11. Clinic, doctor, or hospital record	
		12. Day-care or nursery school record	

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