## **Badge Process**

- 1. Complete this application.
- 2. Find the list of acceptable documents that you may use to provide identity and work authorization on the last page of this application and locate **original unaltered** documents.
- 3. Call (715) 365-3416 or email admin@flyrhinelander.com to make a badge application appointment. Bring your completed application, acceptable identity documents and payment to your appointment. A copy of your fingerprints will be made and your photo will be taken at the appointment.
- 4. Badge applications usually take at least 3 business days for approval. Call the Airport at (715) 365-3416 to check on your status after 5 days and make arrangement to schedule your training and pick up your badge. You have 30 days from the application date to pick up your badge. If you do not pick up your badge within 30 days you will have to repeat the entire application process.
- 5. Your badge will be valid for 1 year. Up to 60 days before your badge expires you will complete a new application form, and attend an appointment to have an updated badge issued.

# **Directions for Completing the Badge Application**

#### Section I – SIDA Badge application only – Disqualifying Offenses

1. SIDA Badge applicants must print name, sign, and date.

### **Section II – Applicant Information**

- 1. All applicants must complete this section.
- 2. Do not complete the "If born outside the United States" section unless it pertains to you.

#### Section III – ID Rules & Requirements

1. All applicants must print name, sign, and date.

#### Section IV - Social Security Number Certification

1. All applicants must complete all boxes in this section.

#### Section V – Authorized Signatory

- 1. This will be completed by your Authorized Signatory.
- 2. Your Authorized Signatory is either:
  - a. Your airport tenant employer, or
  - b. Airport organization on the airfield, or
  - c. The airport if you are a tenant

#### Section VI - Privacy Act Notice

1. All applicants must print name, sign, and date.

#### **Section VII – List of Acceptable Documents**

1. Review the list of acceptable documents on the last page of this application before coming to your appointment.



# RHINELANDER/ONEIDA COUNTY AIRPORT SECURITY BADGE APPLICATION

IMPORTANT: SECTION I must be reviewed and completed prior to completing SECTIONS II through V. If you have been convicted or found "not guilty by reason of insanity" of any of the crimes listed in SECTION I, for the SIDA application, you cannot be granted unescorted access to airport restricted areas and will not be issued an airport ID.

Reason for Request: (Please Check One) New Issue Renewal Replacement							
			<u> </u>				
<b>SECTION I: CRIM</b>	IINAL HISTOR	Y DECLAR	$\mathbf{AT}$	ION			
Disqualifying Crimes as defined by CFR Part 1542.209  1. Forgery of certificates, false marking of aircraft, and other aircraft registration violation; 49 U.S.C. 46306  2. Interference with air navigation; 49 U.S.C. 46308  3. Improper transportation of a hazardous material; 49 U.S.C. 46312  4. Aircraft piracy; 49 U.S.C. 46502  5. Interference with flight crew members or flight attendants; 49 U.S.C. 46504  6. Commission of certain crimes aboard aircraft in flight; 49 U.S.C. 46506  7. Carrying a weapon or explosive aboard an aircraft; 49 U.S.C. 46505  8. Conveying false information and threats; 49 U.S.C. 46507  9. Aircraft piracy outside the special aircraft jurisdiction of the United States; 49 U.S.C. 46502(b)  10. Lighting violations involving transporting controlled substances; 49 U.S.C. 46315  11. Unlawful entry into an aircraft or airport area that serves air carriers or foreign air carriers contrary to established security requirements; 49 U.S.C. 46314  12. Destruction of an aircraft or aircraft facility; 18 U.S.C.32.  13. Murder.  14. Assault with intent to murder.				<ol> <li>Kidnapping or hostage taking</li> <li>Treason.</li> <li>Rape or aggravated sexual abuse.</li> <li>Unlawful possession, use, sale, distribution, or manufacture of an explosive or weapon.</li> <li>Extortion.</li> <li>Armed or felony unarmed robbery.</li> <li>Distribution of, or intent to distribute, a controlled substance.</li> <li>Felony arson.</li> <li>Felony involving a threat.</li> <li>Felony involving - (i) Willful destruction of property; (ii) Importation or manufacture of a controlled substance; (iii) Burglary; (iv) Theft; (v) Dishonesty, fraud, or misrepresentation; (vi) Possession or distribution of stolen property; (vii) Aggravated assault; (viii) Bribery; or (ix) Illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than 1 year.</li> <li>Violence at international airports; 18 U.S.C. 37.</li> <li>Conspiracy or attempt to commit any of the criminal acts listed in this paragraph.</li> </ol>			
continuing obligation to disclose to t  Applicant's Full Name (Printed):	_						ority. Date:
SECTION II: APPLIC	CANT INFORMAT	TION					
Full Last Name		Full First Name				Full Middle N	ame
Maiden Name, Name Changes, or A	Aliases (if applicable)	1				Social Securit	y Number
Current Address		City		State	Zip Code		
Phone Number		E-Mail Address			Country of Birth		
State or Territory of Birth	Country of Citizenship	Driver's License Number		State	Expiration (MM/YY)		
Date of Birth (MM/DD/YYYY)	Height (ft/in)	Weight (lbs)		Gender	Eye Color	Hair Color	Race
Employer/Affiliation		If born outside documentation					st provide associated
Alien Registration Number			Non-Immigrant VISA and Control Number				
I-94 Arrival/Departure Number				Certificate of Naturalization Number			
Certification of Birth/Birth Abroad				Certification of U.S Citizenship			

# SECTION III: ID RULES & REQUIREMENTS

- 1. I will comply with the access control system in place and use my ID each time I enter a restricted area. While I am in a restricted area, I will display my ID visibly above the waist.
- 2. I will challenge those persons found in restricted areas that are not displaying proper identification and will immediately report such individuals to Airport Administration.
- 3. I will not permit unauthorized persons to enter restricted areas without challenging those persons and notifying Airport Administration.
- 4. I will not permit others to enter/"piggyback" through doors and gates I have accessed unless they are under my escort.
- 5. I will not escort any person who has been issued a Rhinelander/Oneida County Airport SIDA or AOA badge.
- 6. I will ensure that persons under my escort in restricted areas remain within my sight and control at all times.
- 7. I will not leave any open or unsecured gate unattended.
- 8. I will not leave any door or gate unsecured after use.
- 9. I will enter only those areas I am authorized to enter.
- 10. I will not use my ID to bypass TSA screening when departing on flights from the Rhinelander/Oneida County Airport terminal.
- 11. I will not permit other persons to use or wear my ID.
- 12. Should my SIDA or AOA badge become lost, stolen, or mutilated, I will make a report immediately to my supervisor and Airport Administration.
- 13. If my badge expires, I will immediately return it to the Airport ID Badging Office either for renewal or surrender as appropriate.
- 14. The ID badge is the property of the Rhinelander/Oneida County Airport and I will surrender it to the airport operator on demand or upon termination.
- 15. I understand all of these rules, those covered in my airport security class, and that violation of one or more of these rules may lead to fines or criminal charges and/or suspension or revocation of my ID.
- 16. I will comply with all federally-issued Security Directives (SD) and Security Regulations; failure to comply may result in monetary fines and/or suspension or revocation of my ID.
- 17. If my Airport ID Badge is revoked due to a violation of Airport Security Requirements, I understand that my information will be added to the Centralized Revocation Database (CRD) for a period of 5 years.
- 18. SIDA Airport ID Badge Holders 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.
- 19. I will not post photos of my badge online.

Applicant's Full Name (Printed):

SECTION IV: CERTIFICATION	N	
understand that a knowing and willful false stater United States Code). I authorize the Social Securit Security Administration, Enrollments Services and 6595 Springfield Center Drive, Springfield, VA 2	e, and correct to the best of my knowledge and beliement can be punished by fine or imprisonment or boty Administration to release my Social Security Nund Vetting Program, Attention: Vetting Programs (TS 20598-6010. I am the individual to whom the informect. I know that if I make any representation that I know that if I make any representation that I know that if I make any representation that I know that if I make any representation that I know that if I make any representation that I know that if I make any representation that I know that if I make any representation that I know that if I make any representation that I know that if I make any representation that I know that if I make any representation that I know that if I make any representation that I know that if I make any representation that I know that	oth (see Section 1001 or Title 18 of the other and full name to the Transportatio SA-10)/Aviation Worker Program, nation applies and want this
Applicant's Full Name (Printed):	Signature:	Date:
Birth Date:	Social Security Number:	

Signature:

**NOTE:** A copy of the criminal record received from the FBI will be provided to you upon receipt of a written request to the Airport Security Coordinator. Please write for all inquiries and questions about CHRC results:

49 CFR Part 1542 Employees (Non-Air Carrier): Airport Security Coordinator Rhinelander/Oneida County Airport 3375 Airport Road Rhinelander, WI 54501 49 CFR Part 1544 Employees (Air Carrier):
Notify your Air Carrier

Date:

SECTION V: AUTHORIZ	ZED SIGNATORY	Y			
Company/Affiliation/Hangar	Authorized Signa	atory Name	Phone Number		
Address (Street, City, State, Zip Code)					
Authorized Signatory Email Address					
Badge Type: SIDA/SECURED/STERILE (BLUE) AOA (GREEN)			Privileges  Escort Authority Required  Is the Authorized Signatory		
		Further Pr	rivilege Justification (if applicable):		
Driver Training Types: None	Non-Mo	vement Area			
I certify that this applicant is actively with unescorted access authority to the Oneida County Airport. This individual understand that the applicant's Airpolonger needed.	ne Security Identification Di ual applicant acknowledges	isplay Area (SIDA)/Secured Ar the security responsibilities un	rea or AOA at the Rhinelander/ nder 49 CFR 1540.105(a). I		
Authorized Signatory Full Name (Pr	rinted):	Signature:	Date:		
инивишининивишининивишининивишининивишининивишинининивишинининивишинининивишининивишининивишининивишининивишин 			лининининининининининининининининининин		
ID Number:	P.I.N.	CE USE ONLY***  Rap Back (If Applicable)	Rap Back Valid To:		
			/		
Fingerprint Record Transmitted	<u>l/Taken:</u>	•			
I.D. Verification/Authorization to Wo	ork: Type #1:		_Type#2:		
Signature:		Date:			
Second Check of Paperwork:					
Fingerprint Response Received:	Approved Denied	I Initials:Date:	CHRC#		
TSA Threat Assessment Received:	Approved Denied	Initials:Date:			
Notification of Authorization:	Approved Denied	I Initials:Date:	<u></u>		
I certify that the listed applicant satisf	actorily completed airports	security training.			
Signature:		Date:			
I certify that the listed applicant has con	mpleted the above selected R	hinelander/Oneida County Airpo	ort driver's training.		
Signature:		Date:			
Badge Issued:					
Date Issued:	Issued By:	Expiration:			
Date Returned:	Received By:	Date Lost:			
Reason for Badge Returned:					
Key Issued: Date Issued:	Date Returned	Key Number:	Access:		

#### SECTION VI: PRIVACY ACT NOTICE

The Privacy Act of 1974 5 U.S.C. 522 a(e)(3)

**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 110-53, August 3, 2007); FAA Reauthorization Act of 2018, §1934(c) (132 Stat. 3186, Public Law 115-254, Oct 5, 2018), and Executive Order 9397, (November 22, 1943) as amended.

**Purpose:** The Department of Homeland Security (DHS) will use the 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 system 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).

DHS will also maintain a national, centralized revocation database of individuals who have had airport- or aircraft operatorissued identification media revoked for noncompliance with aviation security requirements. DHS has established a process to allow an individual whose name is mistakenly entered into the database to correct the record and have the individual's name expunged from the database. If an individual who is listed in the centralized database wishes to pursue expungement due to mistaken identity, the individual must send an email to TSA at Aviation.workers@tsa.dhs.gov.

Routine Uses: In addition to those disclosures generally permitted under 5 U.S.C. 522 a(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 FBI's Blanket Routine Uses.

**Disclosure:** Pursuant to § 1934(c) of the FAA Reauthorization Act of 2018, TSA is required to collect your SSN on applications for Secure Identification Display Area (SIDA) credentials. For SIDA applications, failure to provide this information will result in denial of a credential. For other aviation credentials, although furnishing your SSN is voluntary, if you do not provide the information requested, DHS may be unable to complete your security threat assessment.

I have read and understand this Privacy Act Notice.			
Applicant's Full Name (Printed):			
Signature:	Date:		

# LISTS OF ACCEPTABLE DOCUMENTS

All documents containing an expiration date must be unexpired.

\* Documents extended by the issuing authority are considered unexpired.

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

Examples of many of these documents appear in the Handbook for Employers (M-274).

LIST A  Documents that Establish Both Identity	05	LIST B	LIST C  Documents that Establish Employment	
and Employment Authorization	OR	Documents that Establish Identity AN	Authorization	
U.S. Passport or U.S. Passport Card     Permanent Resident Card or Alien Registration Receipt Card (Form I-551)     Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa		Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or	A Social Security Account Number card, unless the card includes one of the following restrictions:	
		information such as name, date of birth, gender, height, eye color, and address	(1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION	
		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. Certification of report of birth issued by the	
5. For an individual temporarily authorized to work for a specific employer because		3. School ID card with a photograph	Department of State (Forms DS-1350, FS-545, FS-240)	
of his or her status or parole:		4. Voter's registration card	3. Original or certified copy of birth certificate	
a. Foreign passport; and		5. U.S. Military card or draft record	issued by a State, county, municipal authority, or territory of the United States	
<b>b.</b> Form I-94 or Form I-94A that has the following:		6. Military dependent's ID card	bearing an official seal	
(1) The same name as the		7. U.S. Coast Guard Merchant Mariner Card	4. Native American tribal document	
passport; and (2) An endorsement of the		8. Native American tribal document	5. U.S. Citizen ID Card (Form I-197)	
individual's status or parole as long as that period of		Driver's license issued by a Canadian government authority	Identification Card for Use of Resident     Citizen in the United States (Form I-179)	
endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or		For persons under age 18 who are unable to present a document listed above:	7. Employment authorization document issued by the Department of Homeland Security	
limitations identified on the form.  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	For examples, see Section 7 and Section 13 of the M-274 on uscis.gov/i-9-central.	
		11. Clinic, doctor, or hospital record	The Form I-766, Employment	
		12. Day-care or nursery school record	Authorization Document, is a List A, <b>Item Number 4.</b> document, not a List C document.	
		Acceptable Receipts		
May be prese	entec	d in lieu of a document listed above for a t	emporary period.	
		For receipt validity dates, see the M-274.		
Receipt for a replacement of a lost, stolen, or damaged List A document.	OR	Receipt for a replacement of a lost, stolen, or damaged List B document.	Receipt for a replacement of a lost, stolen, or damaged List C document.	
Form I-94 issued to a lawful permanent resident that contains an I-551 stamp and a photograph of the individual.				
Form I-94 with "RE" notation or refugee stamp issued to a refugee.				

<sup>\*</sup>Refer to the Employment Authorization Extensions page on <u>I-9 Central</u> for more information.