

**PERSONAL DATA QUESTIONNAIRE** – (See AR 380-67 for use of this form; proponent is AMSTA-AN-ESP)

<b>CONTRACTOR COMPANY NAME (Prime)</b>					<b>WORK PHONE</b>		
<b>SUBCONTRACTOR NAME</b>			<b>CONTRACT NUMBER</b>		<b>CONTRACT EXPIRES</b>		
<b>INDIVIDUAL'S NAME</b> (First name, Middle name, Last name) ***NO INITIALS ***					<b>SSN</b>		
<b>OTHER NAMES USED (INCLUDE FORMER MARRIED NAMES)</b>					<b>TYPE BADGE/AREA:</b>		
<b>DATE OF BIRTH</b>			<b>PLACE OF BIRTH</b>			<b>CITIZENSHIP</b>	
<b>MONTH</b>	<b>DAY</b>	<b>YEAR</b>	<b>CITY</b>	<b>COUNTY</b>	<b>STATE</b>		
*** <b>NOTE</b> ***IF YOU WERE BORN OUTSIDE OF THE UNITED STATES, YOU MUST FURNISH PROOF OF U.S. CITIZENSHIP UPON SUBMISSION OF THIS FORM TO THIS INSTALLATION. PROOF OF U.S. CITIZENSHIP MUST BE SUBMITTED <i>IN PERSON</i> BY THE INDIVIDUAL, ALONG WITH THIS FORM, TO THE BADGE OFFICE, PHYSICAL SECURITY DIVISION, DES.							
<b>PHYSICAL DESCRIPTION</b>		<b>COLOR EYES</b>	<b>COLOR HAIR</b>	<b>HEIGHT</b>	<b>WEIGHT</b>	<b>SEX</b>	<b>RACE</b>
<b>DRIVERS LICENSE NO.</b>		<b>STATE OF ISSUE</b>	<b>OR</b>	<b>STATE IDENTIFICATION NO.</b>		<b>STATE OF ISSUE</b>	
<b>ADDRESSES FOR THE PAST FIVE (5) YEARS, INCLUDING PRESENT ADDRESS: (STREET, CITY, COUNTY, STATE)</b>							
<b>1.</b>				<b>4.</b>			
(County)				(County)			
<b>2.</b>				<b>5.</b>			
(County)				(County)			
<b>3.</b>				<b>6.</b>			
(County)				(County)			
<b>AUTHORITY:</b> Internal Security Act of 1950 (50 USC 797); Executive Order 9397. <b>PRINCIPAL PURPOSE:</b> To document information necessary for selection, assignment or termination for persons desiring entry to all, or parts, of Anniston Army Depot. <b>ROUTINE USES:</b> The information provided will be furnished to the Directorate of Emergency Services at Anniston Army Depot; to officials within the Department of Defense who have a need for it to perform official business. <b>NATURE OF DISCLOSURE:</b> Disclosure of the requested information is voluntary. Failure to provide the information, however, may result in being denied unescorted access to the installation.							
<b>LEGAL SIGNATURE OF INDIVIDUAL REQUESTING ACCESS:</b>						<b>DATE</b>	
***** <b>CERTIFICATION</b> *****							
I certify that the individual named above is, in fact, an employee of the company as listed above. I understand that a knowing and willful false statement can be punished by fine or imprisonment, or both. (U.S. Code, title 18 USC 1001)							
<b>SIGNATURE OF AUTHORIZED PERSONNEL/REPRESENTATIVE</b>						<b>DATE</b>	
<b>DO NOT WRITE BELOW THIS LINE</b>							
<b>DISAPPROVED</b>		<b>SIGNATURE OF DISAPPROVING OFFICIAL</b>			<b>DATE</b>		
<b>APPROVED</b>					<b>NO DRIVING PRIVILEGES</b>		
___ <b>PHOTOGRAPHIC BADGE</b>					Badge Office Issues Letter		
___ <b>NON-PHOTOGRAPHIC BADGE – NO ESCORT REQUIRED</b>							
___ <b>NON-PHOTOGRAPHIC BADGE - ESCORT REQUIRED</b>							
<b>SIGNATURE OF APPROVING OFFICIAL:</b>						<b>DATE</b>	