REQUEST FOR PRE-APPROVED SHORT-TERM VISITOR'S PASS

PRIVACY ACT STATEMENT

AUTHORITY: 50 U.S.C. 797

PRINCIPAL PURPOSE(S): To identify personnel requesting unescorted entry onto Grand Forks Air Force Base who are conducting Official Business/Visitors/Family Members or any other personnel who have a valid purpose to enter the installation. Short-term visitor's passes may be issued to individuals who establish their identity, are determined fit for installation access, and who establish an acceptable purpose for presence on the installation. Fitness will be established through a review of the visitor's prior criminal history through government authoritative sources. The 319 SFS Form 74a will only be used at Grand Forks AFB, ND by the Security Forces S5P Section.

ROUTINE USE(S): To Grand Forks Air Force Base so that such information may be used to conduct background investigations through querying of government databases to vet access candidates to the greatest extent practicable and lawful.

DISCLOSURE: Voluntary for all personnel who wish to gain access to Grand Forks Air Force Base. However, failure to provide information may result in visitors being denied installation access.

PART 1 – INSTRUCTIONS

- (1) Sponsors will provide this document to their visitors. This form may be requested by e-mailing casey.reber@us.af.mil and jina.waller@us.af.mil or by downloading this document from https://www.grandforks.af.mil/Contact/Grand-Forks-Virtual-Visitor-Center/. This document will not be submitted earlier than 72 hours prior to the requested start date.
- (2) Visitors will read and review all portions of this document and complete Part 2 Visitor Information. Visitors will also provide a clear/legible scanned/photo copy of the front and back of their valid identification, e.g. Driver's License, Passport, State I.D., etc. to the sponsor. Note: If visitors do not provide correct information, the document will not be accepted.
- (3) Sponsors will review completed SFS Form 74a and complete Part 3 Sponsor Certification/Validation, signing that they have understood and validated all information on this form. This document and the scanned/photo copy of the valid I.D. will be emailed to casey.reber@us.af.mil and jina.waller@us.af.mil. Alternatively, sponsors may hand carry the form to 319 SFS/S5P. All SF Form 74a documents will be e-mailed from .mil encrypted accounts ONLY.
- (4) Pass & ID will notify the sponsor via e-mail if the request was approved. Visitor(s) and sponsor will then report to Bldg. #812 for collection of biometrics (e.g. fingerprints and photograph) and will be issued the visitor's pass.
- (5) Short-Term passes will only be issued up to 7 calendar days.

OPTIONAL: Visitors may Pre-Enroll themselves to expedite the registration process by visiting the DBIDS Pre-Enrollment website at https://dbids-global-enroll.dmdc.mil/preenrollui/#!/ When utilizing Pre-Enrollment, write your confirmation code below so that your profile can be loaded at the Visitor Control Center.

DBIDS Pre-Enrollment Confirmation Code:

BBIBS TTC Enforment Communication Code:						
PART 2 – VISITOR INFORMATION						
1. FULL NAME (LAST, FIRST, MIDDLE NAME)			2. DATE OF BIRTH			
3. HOME ADDRESS 4		4. VALID I.D. NUMBER				
MA CONTRACTOR						
5. VALID I.D. ISSUER	6. PHONE NU	MBER	7. SOCIAL SECURITY NUMBER			
		William Control	//			
8. DAYS REQUESTED				ED		
SU M T W TH F SA			TO -			
			TH YEAR DAY MONTH YEAR			
PART 3 – SPONSOR CERTIFICATION/VALIDATION						
1. FULL NAME (LAST, FIRST, MIDDLE NAME) 2. PHONE NUMBER 3. ORGANIZATION					IZATION	
			7			
4. CERTIFICATION						
By signing below, you are indicating that you understand that you are responsible for the visitor listed above. You also indicate that you have						
explained the rules regarding driving, prohibited areas, and personal conduct while on Grand Forks AFB with the above visitor.						
A CO MED MED						
SPONSOR SIGNATURE / DATE OF SIGNATURE						
PART 4 – FOR SECURITY FORCES USE ONLY						
1. BACKGROUND CHECK (PRINT NAME)		2. ISSUE DATE		SUED BY	4. MRI	
ii brenskoonb enben (riant mini)	/ /	2. ISSULDATE	J. 15	SCLD D1	** 11222	
	4		1	/		
THIS FORM IS SUBJECT TO THE PRIVACY ACT OF 1974 5 U.S.C.						

This form is FOR OFFICIAL USE ONLY