



Request For Security Action

All REQUIRED fields (In RED) must be completed.

SECTION 1: TYPE OF REQUEST					
INITIAL CLEARANCE/ACCESS	UPGRADE	DOWNGRADE			
REVALIDATION	SPOUSE/CO-HABITANT CHECK	CANCEL REQUEST			
SECTION 2: APPLICANT DETAIL					
1. APPLICANT NAME					2. SOCIAL SECURITY NUMBER
Last:	First:	Middle:			
3. DATE OF BIRTH (mm/dd/yyyy)	4. PLACE OF BIRTH (City/State/Country)		5. CITIZENSHIP		
			US		
6. PASSPORT TYPE		7. DATE PASSPORT ISSUED (mm/dd/yyyy)		Other	Country:
US	FOREIGN	N/A		Dual	Country:
8. APPLICANT'S PERSONAL E-MAIL ADDRESS					
SECTION 3: USAID EMPLOYEE INFORMATION					
USAID EMPLOYEE NAME					SOCIAL SECURITY NUMBER
Last:	First:	Middle:			
SECTION 4: POSITION/EMPLOYMENT DETAIL					
9. ASSIGNMENT/DUTY LOCATION					
RRB					
SA-44	Bureau/Office/Room Location:				
POTOMAC YARD					
OVERSEAS MISSION	Mission/country:				
NON-USAID SPACE	Street/City/State/Country:				
10. RESTRICTED AREA/LOCATION			YES	NO	11. POSITION TITLE
12. TYPE OF POSITION (Refer To Staffing Pattern)					
DIRECT HIRE	FS	GS	SES	AD	Political Appointee
DIRECT HIRE-Temporary/Term		FSL	GS	STAR	Intern (Paid)
Termination Date:					
Position Sequence Number (IP #):					
Public Trust Classification (PT):		L=Low	M=Moderate	H=High	
Security Sensitivity Code (SEC):		1=Non-Sensitive/Low Risk		2=Non-Critical Sensitive	
		3=Critical Sensitive		4=Special Sensitive	
CONTRACTOR	PSC	Institutional Contractor			
Contract Number:		Classified Contract?		YES	NO
Contract Effective Date:		Contract Termination Date:			
Company Name:		Company Address:			
OTHER/NON-DIRECT HIRE	Fellow	Intern/Volunteer (Unpaid)		IPA	Other:
Termination Date:					
13. TYPE OF CLEARANCE/ACCESS REQUIRED					
HSPD-12 (Facility/Computer Access Only)		Confidential	Secret	Top Secret	

SECTION 5: REQUESTOR DETAIL

14. BUREAU/OFFICE/MISSION SELECTING OFFICIAL

Name: Title: Office Symbol/Address:
Telephone Number:

15. REQUESTOR SUBMITTING AID 6-1 FORM

Name: Title: Office Symbol/Address:
Telephone Number:
Signature: Date Submitted:

SECTION 6: PREVIOUS CLEARANCE VERIFICATION
(To be completed by USAID: Office of Security)

Clearance Level Granted: Date Clearance Granted:
Granting Agency:
Investigation Type Conducted: Date Investigation Completed:
Investigating Agency:
Verified By:
Additional Comments:

Eligible for Reciprocity or Revalidation; Current Clearance & Investigation meet requirements

Eligible for Reciprocity; However, current investigation DOES NOT meet suitability investigation requirements

Required Forms: Reciprocity will be granted; however, USAID/SEC will request a complete security packet in order to conduct the required suitability investigation per E.O. 10450: Security Requirements for Government Employment

Not Eligible for Reciprocity or Revalidation; Either a Break in Federal Service, Clearance and/or investigation DOES NOT meet requirements

Required Forms: Complete security packet

Completed by (USAID/SEC Representative): Date:

SECTION 7: SECURITY ACTION DETAIL
(To be completed by USAID: Office of Security)

Initial Investigation	Suitability Investigation	Reciprocity	Revalidation
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SECTION 8: SECURITY PACKET REJECTION
(To be completed by USAID: Office of Security, if applicable)

REASON FOR REJECTION

Incomplete Packet/Missing Documents	Did not meet 14-day requirement
Signature Pages/e-QIP Request Numbers DO NOT match	Other (See Comments)

COMMENTS: