

AOA BADGE APPLICATION - INSTRUCTIONS - DO NOT STAPLE THIS PAGE TO APPLICATION

- Section A
 - Full Legal Name - enter your current, legal name.
 - Previously Used Names - enter any aliases you have used, including maiden names.
 - Current Mailing Address - enter your current mailing address, PO boxes are acceptable.
 - Country of Birth - enter the country you were born in (e.g. USA).
 - Citizenship Country - enter the country that you are currently a legal citizen of.
 - Alien Registration Number through Passport Number - enter information if applicable, for questions contact officer.
 - For What Purpose Are You Applying for This Badge - select the category that best fits why you are applying for an AOA badge.
 - **T-Hangar Tenant** - select this option if you are NAMED on an active t-hangar lease with the airport
 - **T-Hangar Authorized User** - select this option if you are a pilot who uses a t-hangar tenants' aircraft. The T-Hangar tenant must sign your application in Section B(2).
 - **Rental/Student Pilot** - select this option if you currently rent aircraft from the FBO or are a Student Pilot operating out of LSE, or use another aircraft but don't need gate access.
 - **Contractor** - select this option if you are a contractor performing work at the LSE airport. You will need to have your application approved by the Authorized Signatory for your project, usually the prime contractor's foreman.
 - **FAA** - select this option if you are an FAA employee performing NAVAID work at LSE.
 - **Other Tenant** - select this option if you are a tenant or are an employee of a tenant located on the airport (other than t-hangars) and require access to the AOA. Specify on the given line which tenant you are with. Your application must be approved by the Authorized Signatory for your organization.
- Section B
 - Complete section (1) if you are a corporate tenant, contractor, or FAA. You will be required to have the Authorized Signatory for your organization sign the space given in this section. If you are unsure of who your Authorized Signatory is, contact an officer for that information.
 - Complete section (2) if you are a t-hangar tenant, t-hangar user, rental pilot, student pilot, or other. You will sign the space under (2) signifying you need a badge and that you are not authorized to drive on the AOA. If you are a t-hangar user, a t-hangar tenant must also sign giving you gate access.
- Section C
 - (1) This section is a certification that you are not making any misrepresentations on this application.
 - (2) This section states that you must report any lost badges or loss of need to have a badge to the airport. Failure to return badges will result in a substantial fee as per current airport policy.
 - (3) This section is your acknowledgment of the airport security procedures. You are further certifying that you will observe gate closures behind you and will prohibit piggybacking.
- Section D
 - This section authorizes the Social Security Administration to release your social security number to the TSA for verification purposes. While not required, not authorizing this release may result in delays in the processing of your application.
 - Privacy act notice explaining how the information provided in this application is used

BADGE PROCESS

1. Complete this application and contact the La Crosse Regional Airport at **(608) 789-7464** to set up an appointment to turn in your application.
2. When going to your appointment, bring in one form of ID from both Columns B and C on Page 4 of this application OR one form of ID from Column A. (Example, a driver's license and social security card is valid OR a passport by itself is valid). The officers will need to see an ORIGINAL of the documents and will record information for our records.
3. Your AOA badge is **\$50** (subject to change) payable at the time you apply for the badge. You can make checks payable to the *City of La Crosse Treasurer* and mail to the address above.
4. Badge applications take approximately 5 days for approval. Call the Airport at **(608) 789-7464** to check on your status after 5 days.

Questions can be sent to airportbadging@lseairport.com

IMPORTANT: You have 30 days to pick up your badge from the application date, if you do not pick up your badge within 30 days you will have to repeat the entire application process and repay the fee.

NOTE: AOA badges are good for 2 year periods with all current badges expiring June of odd numbered years. Upon expiration of your badge you will have to re-complete this form, pay a renewal fee (currently **\$30**), and have an updated badge issued. Do Not post photos of your issued badge online.



AOA

2850 AIRPORT ROAD
LA CROSSE, WI 54603
(608) 789-7464

NEW AND RENEWAL AOA BADGE APPLICATION

A) THIS SECTION TO BE COMPLETED BY APPLICANT

| | | | | | |
|---|--|---|---|---|---|
| Legal Last Name | | Legal First Name | | Legal Middle Name | |
| Previously Used Name (Last, First, Middle) | | | Previously Used Name (Last, First, Middle) | | |
| Current Mailing Address | | | | | |
| City | | | State | | Zip |
| Daytime Phone | | Employer Phone | | E-Mail Address | |
| Employer | | Date of Birth (MM/DD/YYYY) | | Citizenship Country | |
| State of Birth | Country of Birth | | Race | | Gender <input type="checkbox"/> Male <input type="checkbox"/> Female |
| Alien Registration # (If Applicable) | | I-94 Arrival/Departure Number (If Applicable) | | Non-Immigrant Visa Number (If Applicable) | |
| Certificate of Birth Abroad # (If Applicable) | | | Certificate of Naturalization # (If Applicable) | | |
| Passport Country (If Applicable) | | | Passport Number (If Applicable) | | |
| Height (Feet/Inches) | | Weight (Pounds) | | Hair Color | Eye Color |
| Badge Type Requested? | <input type="checkbox"/> AOA <input type="checkbox"/> AOA Contractor | Badge Purpose: | <input type="checkbox"/> T-Hangar Tenant | <input type="checkbox"/> T-Hangar User | <input type="checkbox"/> Contractor <input type="checkbox"/> FAA |
| Reason For Application? | <input type="checkbox"/> New Badge | <input type="checkbox"/> Expired Badge | <input type="checkbox"/> Name Change | <input type="checkbox"/> Replace Lost Badge | <input type="checkbox"/> Replace Stolen Badge |
| Are you a pilot? | <input type="checkbox"/> Yes <input type="checkbox"/> No | Pilots License Number (If Applicable) | | | |
| Are you a citizen of the United States OR are you authorized to work by the Government of the United States OR a commercial driver licensed by Canada or Mexico and admitted to the United States under 8 CFR 214.2(b)(4)(i)(E) to conduct business in the United States? | | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

B) COMPLETE SECTION 1 OR 2 ONLY – DO NOT COMPLETE BOTH – ASK IF UNSURE

1) THIS SECTION TO BE COMPLETED BY CORPORATE TENANTS AND CONTRACTOR SIGNATORY AUTHORITIES – DO NOT COMPLETE IF YOU ARE A T-HANGAR TENANT OR STUDENT/RENTAL PILOT

| | | |
|---|---|------------------------------------|
| Applicants Job Title or Purpose | Authorizing Company | Authorizing Signatory Phone Number |
| AOA badges are issued only upon approval from your organizations Authorized Signatory. This space must be completed. | | |
| I, Authorized Signatory for the above applicant, hereby certify that the above listed applicant needs access to the Air Operations Area to perform their job duties and shall be added to my signed Authorized Signatory - List of Authorized Badge Holders, I further certify that I am an Authorized Signatory authorized to approve this applicant and will notify the La Crosse Airport upon termination of applicant's privileges. The individual applicant acknowledges their security responsibilities under 49 CFR § 1540.105(a); | | |
| by checking the following box I hereby certify the above applicant requires escorting privileges based on operational need. <input type="checkbox"/> | | |
| Name of Signatory Authority (Print) | Signatory Authority Signature Authorizing Badge | Date |

2) THIS SECTION TO BE COMPLETED BY T-HANGAR TENANTS OR STUDENT/RENTAL PILOTS ONLY

If, you are an aircraft hangar lessee, student pilot or aircraft rental pilot, you can be your own authorized signatory and can sign for yourself.

I hereby certify that I require access to the AOA in order to operate an aircraft in the AOA as approved by airport management. I understand that this authorization does not extend driving privileges to areas beyond my rented area. I shall notify the La Crosse Airport upon termination of my tenancy and shall return my badge at that time.

If you are not the lessee of the aircraft hangar but you use or require access to the hangar, you must have the aircraft hangar lessee sign this application below authorizing access privileges. Only t-hangar tenants and t-hangar users with an authorized signature will be granted access to gates. I hereby certify that the applicant listed in Section A above requires access to my leased hangar. I understand that I am ultimately responsible for the actions of the above listed individual including all charges related to the non-return of above individual's AOA access card. Further, I will notify the La Crosse Airport when the above individual does not require access to my leased hangar.

| | | |
|----------------------------|--|----------------------|
| Name of Applicant (Print) | Signature of Applicant | Date |
| T-Hangar # (If Applicable) | Signature of T-Hangar Lessee (If Applicable) | Date (If Applicable) |

C) NOTICE TO LA CROSSE AIRPORT AOA BADGE APPLICANT (Sign in Presence of Staff Only)

(1) I hereby certify that 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 of the United States Code).

Further, I agree and understand that any misstatements of or material omissions of facts hereon may cause forfeiture of my privilege to receive an Airport Identification Badge. My point of contact for this information shall be the Airport Security Coordinator.

(2) I understand that Airport Management may deny my access at any time and upon separation from my employment this proximity card and ID badge will be returned immediately. I understand that if I should lose my proximity card and/or ID badge I am obligated to report the loss to airport management immediately so that my cards may be removed from the system. I also understand that there will be a fee, as per current airport policy, for a replacement proximity card and/or ID badge.

(3) I understand all my responsibilities as they pertain to the possession of a La Crosse Regional Airport Identification Badge.

I will challenge or report immediately to my supervisor and Airport Management, anyone whom I observe in a restricted area that does not display the proper Airport Identification Badge.

CAUTION: SIGN IN PHYSICAL PRESENCE OF TRUSTED AGENT

| | | |
|---------------------------------|----------------------------|------|
| Name of Applicant (Print) | Signature of Applicant | Date |
| Witness - Name of Trusted Agent | Signature of Trusted Agent | Date |

D) SOCIAL SECURITY NUMBER AUTHORIZATION

I authorize the Social Security Administration to release my Social Security Number and full name to the Transportation Security Administration, Enrollment 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.

NOTE: An individual who has a U.S. Social Security Administration issued SSN but fails to provide it to TSA may delay or prevent completion of the STA and may be denied ID media (badge).

| Name of Applicant (Print) | Signature of Applicant | Date of Birth | SSN |
|---------------------------|------------------------|---------------|-----|
| | | | |

TSA PRIVACY ACT STATEMENT

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. If applicable, 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). DHS will also maintain a national, centralized revocation database of individuals who have had airport- or aircraft operator- issued 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. § 552a(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. § 552a(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: 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:

Printed Name: _____

Signature: _____

Date: _____

E) THIS SECTION TO BE COMPLETED BY AIRPORT PERSONNEL

| | | | |
|--|---|--|-------------|
| Application Process Completed | | Trusted Agent Initials | Date |
| Applicants information completed and correct to best of knowledge | | | |
| Signatory/Self Authority information completed, signed, and verified | | | |
| Signatures in Section C completed in presence of Trusted Agent | | | |
| Application fee paid and payment submitted to airport administration office: | | <input type="checkbox"/> New application \$50.00 <input type="checkbox"/> Renewal application \$30.00 <input type="checkbox"/> Lost/Stolen badge application (circle fee) \$30 \$100 \$150 <input type="checkbox"/> CAP Cadet/Volunteer \$5.00 | |
| Amount \$ _____ | | | |
| <input type="checkbox"/> Cash | | | |
| <input type="checkbox"/> Check # _____ | | | |
| <input type="checkbox"/> Bill Account _____ | | | |
| Identity and work authorization forms have been verified and submitted to TELOS (Highlight Forms Presented in Section G) | | | |
| Applicants information entered and submitted to TELOS | | | |
| STA Status | <input type="checkbox"/> Accepted <input type="checkbox"/> Rejected | | |
| Access/Rules/Regulations training completed | | | |
| Badge Issued | <input type="checkbox"/> AOA (Yellow Background) <input type="checkbox"/> AOA Contractor (Blue Background) | | |
| Access Level | | | |
| Applicant added to signatory master list (if applicable) | | | |
| Application reviewed and filed by supervisor | | | |
| Notes | | | |

F) LIST OF ACCEPTABLE DOCUMENTS – ALL DOCUMENTS MUST BE UNEXPIRED

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.

| | |
|------------------------|------------------------|
| Badge Number: _____ | File: _____ |
| Applicant Name: _____ | Expiration Date: _____ |
| Date Issued: _____ | TA Terminating: _____ |
| Date Terminated: _____ | |

| LIST A Documents that Establish Both Identity and Employment Authorization | OR | LIST B Documents that Establish Identity | AND | LIST C Documents that Establish Employment Authorization |
|---|----|---|-----|---|
| 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: (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION |
| 2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551) | | 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. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240) |
| 3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa | | 3. School ID card with a photograph | | 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 |
| 4. Employment Authorization Document that contains a photograph (Form I-766) | | 4. Voter's registration card | | 4. Native American tribal document |
| 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: (1) The same name as the passport; and (2) 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. | | 5. U.S. Military card or draft record | | 5. U.S. Citizen ID Card (Form I-197) |
| | | 6. Military dependent's ID card | | 6. Identification Card for Use of Resident Citizen in the United States (Form I-179) |
| | | 7. U.S. Coast Guard Merchant Mariner Card | | 7. Employment authorization document issued by the Department of Homeland Security |
| | | 8. Native American tribal document | | |
| | | 9. Driver's license issued by a Canadian government authority | | |
| | | For persons under age 18 who are unable to present a document listed above: | | |
| | | 10. School record or report card | | |
| | | 11. Clinic, doctor, or hospital record | | |
| | | 12. Day-care or nursery school record | | |
| 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 | | | | |