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

- Section A
 - o Full Legal Name enter your current, legal name.
 - o Previously Used Names enter any aliases you have used, including maiden names
 - o Current Mailing Address enter your current mailing address, PO boxes are acceptable.
 - Employer enter your current airport employer, if more than one completed second application.
 Contractors must also complete this line.
 - o Country of Birth enter the country you were born in (e.g. USA).
 - o Citizenship Country enter the country that you are currently a legal citizen of.
 - o Alien Registration Number through Passport Number enter information if applicable, for questions contact officer.
- Section B
 - This section is your authorization for a badge. You will be required to have the Authorized Signatory for your organization sign the space given in this section. If you are unsure of whom your Authorized Signatory is, contact Airport staff for that information.
- Section C sign in presence of Airport staff
 - o (1) This section is a certification that you are not making any misrepresentations on this application.
 - o (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
 - o This section authorizes the Social Security Administration to release your social security number to the TSA for verification purposes. The absence of a Social Security Number will result in an error.
- Section E
 - o If you have ever been convicted of a crime listed mark the appropriate box and notify the officer when submitting your application, you may be ineligible for a badge if any boxes are selected

BADGE PROCESS

- 1. Complete this application and contact <u>The La Crosse Regional Airport</u> at **(608) 789-7464** to set up an appointment to turn in your application:
- 2. When going to your appointment, <u>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 the information for our records.</u>
- 3. At your appointment you will be required to have your fingerprints taken.
- 4. Your SIDA badge is \$75 (subject to change) payable at the time the application is turned in. You can make checks payable to the City of La Crosse Treasurer.
- 5. Badge applications can take approximately 5 days for approval. Call the Airport at **(608) 789-7464** to check on your status after 5 days.
- 6. When your application has been approved and you have made an appointment with staff to pick up your badge, you will be issued a photo ID badge and procedures document.

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 re-pay the fee.

NOTE: SIDA badges are good for 2 year periods with all current badges expiring June of even 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 badge online.

Questions can be sent to airportbadging@lseairport.com



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:	



SIDA/STERILE AREA

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

NEW AND RENEWAL SIDA/STERILE AREA BADGE APPLICATION

A) THIS SECTION TO	RE COMPL	ETEN RV	APPLIC	A NIT				
Legal Last Name	BL COMITE		Legal Firs			I	egal Middle.	Name
Previously Used Name (Las	t, First, Middle)	1		Previou	usly Used Name	e (Last, Fi	rst, Middle)	
Current Mailing Address								
City					State		Zip	
Daytime Phone		Emp	loyer Phon	е		E-Mai	l Address	
Employer		Date	of Birth (M	MM/DD/YYYY)		Citize	nship Countr	у
State of Birth	Country of Bi	th			Race			Sex Male Female
Alien Registration # (If App	licable)	I-94 Arrivo	ıl/Departur	e Number (If A	Applicable)		mmigrant Vis cable)	sa Number (If
Certificate of Birth Abroad	# (If Applicabl	e)		Certificate o	f Naturalization	# (If Ap	plicable)	
Passport Country (If Applic	able)			Passport Nu	mber (If Applice	able)		
Height (Feet/Inches)	Weight (F	ounds)		Hair Color			Eye Color	
Badge Type Requested?	☐ SIDA [☐ SIDA Co	ntractor [STERILE ARE	A Concessiona	iire		
Reason For Application?								eplace Stolen Badge
Are you a citizen of the Uni commercial driver licensed to conduct business in the	d by Canada d	or Mexico o						
B) THIS SECTION TO	BE COMPL	ETED BY	AUTHOR	RIZING CO	MPANY SIG	OTAN	RY AUTHO	ORITY
Applicants Job Title		Auth	norizing Co	mpany		Autho	ring Signato	ry Phone Number
SIDA/STERILE AREA badges	are issued onl	y upon apı	proval from	ı your organiz	ations Authorize	ed Signa	tory. This spo	ace must be completed.
I, Authorized Signatory for t perform their job duties and am an Authorized Signator privileges. The individual a	d shall be add y authorized to	ed to my si approve t	gned Auth	orized Signato ant and will no	ory - List of Auth tify the La Cros	orized Bo se Airpoi	adge Holder t upon termi	s, I further certify that I
by checking the following	box I hereby c	ertify the a	bove appli	icant requires	escorting privil	eges ba	sed on oper	ational need.
Signatory Authority Print No	ıme Authorizin	g <mark>Badge</mark>	Signa	tory Authority	Signature Auth	orizing B	adge	Date

C) NOTICE TO LA CROSSE AIRPORT SIDA/STERILE AREA BADGE APPLICANT (Sign in the presence of Airport staff ONLY)

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. I also understand that Federal Regulations 49 CFR § 1542.209 (I), impose a continuing obligation that I disclose to the airport operator within 24 hours if I am convicted of any disqualifying criminal offense including findings of not guilty by reason of insanity while I have unescorted access authority. I also understand that I may receive a copy of the criminal record received from the FBI if I request it in writing from the airport operator. My point of contact for this information shall be the Airport Security Coordinator.

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.

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.

I have participated in the required Security Identification Display Area Training specific to the La Crosse Regional Airport.

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.

I verify that I have not been convicted of any of the criminal offenses listed in section F of this application.

Name of Applicant (Print)	Signature of Applicant	Date
Witness - Name of Trusted Agent (Officer)	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, Intelligence and Analysis (IA), Attention: Aviation Programs (TSA-10)/Aviation Worker Program, 601 South 12th Street, Arlington, VA 20598.

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).

completion of me on tune may be demoted in			
Name of Applicant (Print)	Signature of Applicant	Date of Birth	SSN

	QUALIFYING CRIMINAL OFFENSES		
	any of the disqualifying criminal offense if you have been convicted, or found not guilty of by reason of insanity,		
	fying crimes listed below in any jurisdiction during the 10 years before the date of the individual's application for authority, or while the individual has unescorted access authority. The disqualifying criminal offenses are as follo		iea
	IMINAL OFFENSE	Convi	cted
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.		7
4.	Aircraft piracy; 49 U.S.C. 46502.		1
5.	Interference with flight crew members or flight attendants; 49 U.S.C. 46504.		Ī
6.	Commission of certain crimes aboard aircraft in flight; 49 U.S.C. 46506.		1
7.	Carrying a weapon or explosive aboard an aircraft; 49 U.S.C. 46505.		Ī
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).		<u> </u>
10.	Lighting violations involving transporting controlled substances; 49 U.S.C. 46315.		Ī
11.	Unlawful entry into an aircraft or airport area that serves air carriers or foreign air carriers contrary to		-
12	established security requirements; 49 U.S.C. 46314. Destruction of an aircraft or aircraft facility; 18 U.S.C. 32.	┼	
	Murder	┼	┽—
		 	╡
	Assault with intent to murder.	 	╡—
	Espionage.	 	<u> </u>
	Sedition.	 	<u> </u>
	Kidnapping or hostage taking.	┵	<u> </u>
	Treason.	<u> </u>	
19.		<u> </u>	<u></u>
	Unlawful possession, use, sale, distribution, or manufacture of an explosive or weapon.	<u> </u>	<u> </u>
	Extortion.		<u></u>
	Armed or felony unarmed robbery.		
23.	Distribution of, or intent to distribute, a controlled substance.		
24.	Felony arson.		<u>] </u>
25.	Felony involving a threat.		<u> </u>
26.	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.		
27.	Violence at international airports; 18 U.S.C. 37.		
28.	Conspiracy or attempt to commit any of the criminal acts listed in this paragraph.		
	Initial here that you have read and completed this page:		

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F) THIS SECTION TO BE COMPLETED BY AIRPORT PERSONNEL						
Application Process Completed		Trusted Agent Initials	Date			
Applicants information completed a	nd correct to best of knowledge					
Signatory Authority information comp	oleted, signed, and verified					
Signatures in Section C completed in	presence of Trusted Agent					
Application fee paid and payment submitted to airport administration	☐ New application \$75.00					
office: Cash Amount \$	☐ Renewal application \$30.00					
☐ Check #	Lost/Stolen badge application (circle fee) \$30 \$100 \$150					
☐ Bill Account	, , , , , , , , , , , , , , , , , , , ,					
Identity and work authorization forms (Highlight Forms Presented in Section	s have been verified and submitted to TELOS G)					
Applicants information entered and s	submitted to TELOS					
STA Status	☐ Accepted ☐ Rejected					
Verification that CHRC fingerprint che	eck was successfully completed					
Access/SIDA training completed						
Badge Issued	SIDA (Red Background)					
Access Level	☐ SIDA Contractor (Blue Background)					
	STERILE AREA (White background)					
Applicant added to signatory master	list					
Application reviewed and filed by su	pervisor					
Notes						
C) LIST OF A CCEPTABLE DO	CHARENTS ALL DOCHMENTS MUST B	E UNEVELDED				

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

Sadge Number:	File:
Applicant Name:	
Date Issued	Expiration Date
Date Terminated	TA Terminating

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.

	LIST A Documents that Establish Both Identity and Employment Authorization)R	LIST B Documents that Establish Identity AM	ID	LIST C Documents that Establish Employment Authorization
_	U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551)	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	1.	A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT
3.	Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine- readable immigrant visa	2	name, date of birth, gender, height, eye color, and address ID card issued by federal, state or local government agencies or entities,		(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION (3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION
4.	Employment Authorization Document that contains a photograph (Form I-766)	L	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)
5.	For a nonimmigrant alien authorized to work for a specific employer because of his or her status: a. Foreign passport; and	4	School ID card with a photograph Voter's registration card U.S. Military card or draft record Military dependent's ID card	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
	b. Form I-94 or Form I-94A that has the following: (1) The same name as the passport; and	7	. U.S. Coast Guard Merchant Mariner Card		Native American tribal document U.S. Citizen ID Card (Form I-197)
	(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.		Native American tribal document Driver's license issued by a Canadian government authority	6.	Identification Card for Use of Resident Citizen in the United States (Form I-179)
			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
6.	Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94 hidicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI	1	School record or report card Clinic, doctor, or hospital record Day-care or nursery school record		