

CIVILIAN EMPLOYEE CLEARANCE RECORD

(This form is affected by the Privacy Act of 1974 - Privacy Act Statement on reverse.)

DATE:

INSTRUCTIONS:

- Prepare in duplicate.
- Items denoted by an asterisk (*) may be cleared by telephone.
- If telephone contact is needed consult Base Telephone Directory.

-Shading indicates item is mandatory for employee to complete.

1. NAME (last, first, middle initial):	2. FUNCTIONAL ADDRESS SYMBOL:	3. POSITION TITLE/GRADE:
4. FORWARDING ADDRESS:	5. SEPARATION TYPE:	6. SUPERVISOR'S SIGNATURE:

7. The individual whose signature appears opposite the respective line entry certifies the above named employee has no property accountability in the organization for which he or she is responsible except as noted.

LINE	ORGANIZATION/ACTION	CLEARED	SIGNATURE
A	DIVISION/STAFF OFFICER CLEARANCE (as required)		
B	TOOL CRIB, BLDG 125 (maintenance personnel only)		
C	SAFETY EQUIPMENT, BLDG 125 (maintenance personnel only)		
D	CIVIL ENGINEERING GROUP, BLDG 1555 (civil engineering employees only)		
*E	INDIVIDUAL EQUIPMENT (Supervisor signs.)		
*F	LIBRARY, BLDG 905		
G	TRAVEL OFFICE, BLDG 301, EAST WING		
*H	GOVERNMENT TELEPHONE CALLING CARD, 78 CS/SCMT, BLDG 214		
I	COMPUTER ACCESS <i>(Supervisor or terminal area security officer must delete computer access, user identification, and password within 3 workdays of employee's departure.)</i>		
J	(1) SECURITY POLICE, PERSONNEL SECURITY OFFICE, BLDG 263		
	(2) PASS AND REGISTRATION SECTION, BLDG 263 (Clear by 1500 hours.)		
	(3) RESERVED OR HANDICAP PARKING SPACE, BLDG 263		
*K	EDUCATION AND TRAINING FLIGHT, BLDG 905, (training aids/books)		
L	(1) CIVILIAN PERSONNEL OFFICE, BLDG 215, ROOM 113, (civilian passport)		
	(2) EMPLOYEE RELATIONS, BLDG 255, SOUTH ENTRANCE NOTE: Final clearance point. Turn in AF Form 354, Civilian Identification Card, and clearance form here.		

M	DO YOU CURRENTLY OR HAVE YOU EVER WORKED AS A CIVILIAN IN A NOISE HAZARD AREA OR BEEN EXPOSED TO ASBESTOS? (Civilian Dispensary Building 207)		
	<input type="checkbox"/> YES <input type="checkbox"/> NO		_____ SUPERVISOR'S SIGNATURE AND DATE

N	EXIT SURVEY - SUPERVISOR MAKE SURE EMPLOYEE IS AWARE/RECEIVED INFO ABOUT THE SURVEY. (ANNOTATE EMPLOYEE'S DECISION TO OR NOT TO PARTICIPATE.)		
	<input type="checkbox"/> YES <input type="checkbox"/> NO		_____ SUPERVISOR'S SIGNATURE AND DATE

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About the ITAOP/savePDF Method

The traditional Field-by-Field creation process is extremely ineffective and slow.

The only realistic option to create high-quality forms is the Insert-Text-Anywhere-on-Page (ITAOP) method.

The field creation process is about 10,000 times faster than the traditional method; the list of ITAOP features is not even available for the traditional method.

ITAOP savePDF method proved to be very simple and completely reliable for millions of users all over the world (incl. individuals, companies, organizations, government employees).

LINE	ORGANIZATION/ACTION	YES	NO	SIGNATURE
O	MEMBER OF AERO CLUB/BLDG 134	<input type="checkbox"/>	<input type="checkbox"/>	
P	MEMBER OF GOLF CLUB/BLDG 794	<input type="checkbox"/>	<input type="checkbox"/>	
Q	MEMBER OF OFFICERS' OPEN MESS/BLDG 542	<input type="checkbox"/>	<input type="checkbox"/>	
R	MEMBER OF NCO OPEN MESS/BLDG 956	<input type="checkbox"/>	<input type="checkbox"/>	
S	GOVERNMENT DRIVERS LICENSE? CONTACT VEHICLE CONTROL OFFICER (VCO)	<input type="checkbox"/>	<input type="checkbox"/>	
T	AUTOMATED DATA PROCESSING EQUIPMENT (ADPE) CUSTODIAN/BLDG 364	<input type="checkbox"/>	<input type="checkbox"/>	
U	GOVERNMENT TRAVEL CARD? CONTACT ORGANIZATION PROGRAM COORDINATOR	<input type="checkbox"/>	<input type="checkbox"/>	
V	US GOVERNMENT IMPAC CREDIT CARD, CONTRACTING POLICY, BLDG 300	<input type="checkbox"/>	<input type="checkbox"/>	
W	PROCUREMENT OFFICIAL? SUPERVISOR MUST VERIFY REQUIREMENTS OF FAR 3.104-7(A) (PROCUREMENT INTEGRITY) ARE MET	<input type="checkbox"/>	<input type="checkbox"/>	

8. REMARKS:

PRIVACY ACT STATEMENT

AUTHORITY: 5 U.S.C. 301, Government Organization and Employee (department regulations).

PRINCIPAL PURPOSE: To assure proper clearance of separating employees.

ROUTINE USE: For all separating employees to clear the base.

DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION: Disclosure is voluntary. The only item supplied by the employee is their forwarding address which is used to forward any remaining compensation. If the employee does not furnish forwarding address, compensation may not be received.