ACCESS MEDIA APPLICATION INSTRUCTIONS

STEP 1 - Fill out the Access Media Application entirely. Must be filled out in BLUE ink. Do not leave any blank sections, sections which do not apply place an “N/A” (not applicable).

STEP 2 - Turn in the completed application to the Access Control Office located on the 1st floor of the main terminal, along with the I-9 acceptable identification. Applications are accepted on Tuesday, Thursday, and Friday from 8:30am to 4:30pm. Full payment of badge fees ($97.00) is due at this time.

STEP 3 - Fingerprints will be taken to perform a background check on applicant. Results may take from 72 hours to two (2) weeks.

STEP 4 - After results have been received, the applicant will be notified and scheduled to attend SIDA class training. SIDA trainings are held every Wednesday’s at 10:00am at the Airport Police’s conference room located in the same offices were applicant applied.

After completion of all requirements, badge privileges will be issued.
APPENDIX L-1
ACCESS CONTROL MEDIA APPLICATION

Section 1  Applicant

**USE BLUE INK ONLY**

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Initial</th>
<th>Aliases</th>
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<tr>
<th>DOB</th>
<th>Height</th>
<th>Weight</th>
<th>Eye Color</th>
<th>Hair Color</th>
<th>Gender</th>
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<tr>
<th>Race</th>
<th>State of Birth</th>
<th>Country of Birth</th>
<th>U.S.</th>
<th>Other</th>
<th>Born</th>
<th>Abroad</th>
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<tr>
<th>Permanent Resident Card #</th>
<th>A- Naturalization #</th>
<th>Other #</th>
<th>Abroad</th>
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<tr>
<th>Driver License #</th>
<th>State</th>
<th>Expiration Date</th>
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<tr>
<th>Home Address</th>
<th>Apt #</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
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<tr>
<th>Home Phone</th>
<th>Cell Phone</th>
<th>E-Mail</th>
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Job Title/Position

By my signature below, I am acknowledging that all the information I have provided 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 can be punished by fine or imprisonment or both (see Section1001 of Title 18 of the United States Code).

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.

Employee Signature ___________________________ Date ____________

Section 2  Authorized Signatory

Is the applicant being sponsored?  ☐ Yes  ☐ No  If yes, please call the airport access control office for additional instructions.

Company Name ___________________________

Physical Address _________________________ City State Zip __________

Company Phone # (_____) Fax # (_____) E-mail __________________________

Requested Access Level(s)  ☐ Grey  ☐ Red  ☐ Green  ☐ Blue  ☐ Purple  ☐ Other

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<tr>
<th>All Areas</th>
<th>Sterile/Secure</th>
<th>Sterile Only</th>
<th>AOA</th>
<th>AOA/Secure</th>
<th>Black (MX CBP)</th>
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Does your employee need to escort others?  ☐ YES  ☐ NO Will your employee need driving privileges?  ☐ YES  ☐ NO

By my signature below, I acknowledge that I am an Authorized Signatory for the company listed above, that a specific need exists for providing the applicant with unescorted access authority for the level requested, and that individual applicant acknowledges their responsibilities under 49 CFR 4540.105(a). In addition, I certify that the information above is true and accurate, that employer authorizes fingerprints to be obtained for the purpose of a CHRC where required for unescorted access. Airport Identification Badge will be returned immediately upon request, termination, or when access is no longer required.

Authorized Signature ___________________________ Print ___________ Date ____________

(ONLY PERSON(S) with signatory authorization on file can sign this form)

Section 3  Office Use Only

BADGE NO. ___________________________ ASC Approval ___________

/ / Date
LRD ID MEDIA APPLICATION INFORMATION

FEDERAL REGULATIONS:
In accordance with 49 CFR § 1542.209 and 1544.229, the airport operator will collect and process fingerprints for all persons requesting unescorted access to the Security Identification Display Area for the purpose of obtaining a criminal history record check (CHRC). A copy of the criminal record will be provided to the individual, if requested by the individual in writing. If the individual has questions regarding the results of the CHRC, please contact the Airport Security Coordinator, Capt. Javier De Hoyos, at (956) 785-1701.

AUTHORIZATION FOR FINGERPRINT-BASED CRIMINAL HISTORY RECORDS CHECK

PLEASE READ AND REVIEW THE FOLLOWING LIST OF DISQUALIFYING CRIMINAL OFFENSES AS LISTED IN TRANSPORTATION SECURITY REGULATION (TSR) 1542.209 (D).

Under 49 CFR §1542.209 (e) all persons applying for unescorted access to the Security Identification Display Area (SIDA) are required to be fingerprinted in order for a criminal history records check (CHRC) to be completed. No applicant may be granted unescorted access to the SIDA if the CHRC reveals a disqualifying criminal offense. An applicant has a disqualifying criminal offense if the applicant has been convicted, or found not guilty by reason of insanity, of any of the disqualifying crimes listed below in any jurisdiction during the 10 years before the date of this application or while the applicant has unescorted access authority:

1. Forgery of certificates, false marking of aircraft, and other aircraft registration violation; 49 U.C.C. 46306.
5. Interference with flight crew members or flight attendants; 49 U.S.C. 46504.
7. Carrying a weapon or explosive aboard aircraft; 49 U.S.C. 46505.
11. Unlawful entry into an aircraft or airport area that serves air carriers or foreign air carriers contrary to established security requirements; 49 U.S.C. 46314.
14. Assault with intent to murder.
15. Espionage.
17. Kidnapping or hostage taking.
18. Treason.
19. Rape or aggravated sexual abuse.
20. Unlawful possession, use, sale, distribution, or manufacture of an explosive or weapon.
22. Armed or felony unarmed robbery.
23. Distribution of, or intent to distribute, a controlled substance.
25. Felony involving a threat.
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.
28. Conspiracy or attempt to commit any of the criminal acts listed in this paragraph.

By signing below, the applicant is stating that he/she does not have a disqualifying criminal offense.

Under 49 CFR 1542.209 (l) the applicant has a continuing obligation to disclose to the airport operator within 24 hours if he or she is convicted of a disqualifying criminal offense that occurs while he or she has unescorted access authority.

PRINT NAME __________________________ SIGNATURE __________________________ DATE _______
“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.”

SOCIAL SECURITY NUMBER: ___________________________ ___________ ___________ ___________ ___________

DATE OF BIRTH: ___________ / ___________ / ___________ 

PRINT FULL NAME: ____________________________________________

SIGNATURE: ________________________________________________

OBTAINING AN AIRPORT ID/ACCESS CONTROL MEDIA IS A PRIVILEGE.
The Airport ID / Access Control Media is the property of the Laredo International Airport and must be returned immediately upon request, damaged, lost and found or no longer valid. A replacement charge and/or penalty fee will be assessed for a lost or unreturned ID Media.

CERTIFICATIONS:
“The information I have provided 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 can be punished by fine or imprisonment or both (see Section 1001 of Title 18 of the United States Code.)”

PRINT NAME ____________________________________________
SIGNATURE ________________________________________________
DATE _____________________________________________________

APPLICANT MUST PRESENT REQUIRED FORMS OF ID.

EXPIRED DOCUMENTS ARE NOT ACCEPTABLE.
PRIVACY ACT NOTICE

The Privacy Act of 1974
5 U.S.C. § 552a(e)(3)


Purpose: The Department of Homeland Security (DHS) will use the biographic information to conduct a security threat assessment. 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 may provide your name and SSN to the Social Security Administration (SSA) to compare that information against SSA records to ensure the validity of the information.

Routine Uses: In addition to those disclosures generally permitted under 5 U.S.C. § 522a(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. § 522a(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 may 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.
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.

<table>
<thead>
<tr>
<th>LIST A</th>
<th>Documents that Establish Both Identity and Employment Authorization OR</th>
<th>LIST B</th>
<th>Documents that Establish Identity AND</th>
<th>LIST C</th>
<th>Documents that Establish Employment Authorization</th>
</tr>
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<tbody>
<tr>
<td>1. U.S. Passport or U.S. Passport Card</td>
<td>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</td>
<td>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</td>
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<tr>
<td>2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</td>
<td>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</td>
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<td>3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa</td>
<td>3. School ID card with a photograph</td>
<td>2. Certification of Birth Abroad issued by the Department of State (Form FS-545)</td>
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<tr>
<td>5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status:</td>
<td>5. U.S. Military card or draft record</td>
<td>4. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal</td>
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<td>a. Foreign passport; and</td>
<td>6. Military dependent’s ID card</td>
<td>5. Native American tribal document</td>
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<td>(1) The same name as the passport; and</td>
<td>7. U.S. Coast Guard Merchant Mariner Card</td>
<td>6. U.S. Citizen ID Card (Form I-197)</td>
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<td>(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.</td>
<td>8. Native American tribal document</td>
<td>7. Identification Card for Use of Resident Citizen in the United States (Form I-179)</td>
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<td>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</td>
<td>For persons under age 18 who are unable to present a document listed above:</td>
<td>8. Employment authorization document issued by the Department of Homeland Security</td>
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<td>10. School record or report card</td>
<td>11. Clinic, doctor, or hospital record</td>
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<td>12. Day-care or nursery school record</td>
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Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274).

Refer to Section 2 of the instructions, titled "Employer or Authorized Representative Review and Verification," for more information about acceptable receipts.