NATIONAL SECURITY POSITION

TO REQUEST SECURITY APPROVAL TO FILL A NATIONAL SECURITY POSITION

The candidate must submit the following investigative forms:

1. **SF 86, Questionnaire for National Security Positions** *(ORIGINAL AND COPY)*
2. **SF 87, Fingerprint Chart** *(TWO SETS) (Not required for periodic reinvestigations.)*
3. **SF 312, Classified Information Nondisclosure Agreement** *(If you are requesting National Security Clearance)* *(ORIGINAL ONLY)*
4. **Employee application** *(ONE COPY)*
5. **OF 306, Declaration for Federal Employment** *(ORIGINAL COPY)*

PART A - CANDIDATE

NAME			SOCIAL SECURITY NUMBER
LAST	FIRST	MI	

PART B - THE NATIONAL SECURITY POSITION

POSITION TITLE			OCCUPATION SERIES NUMBER	GRADE
DUTY STATION	CITY	STATE OR COUNTRY		

NATIONAL SECURITY POSITION LEVEL *(Check one block only)*

4 ☐ SPECIAL - SENSITIVE   3 ☐ CRITICAL - SENSITIVE   2 ☐ NONCRITICAL - SENSITIVE

THIS POSITION REQUIRES ACCESS TO CLASSIFIED INFORMATION *(Check one block only)*	SENSITIVE ADP-COMPUTER DUTIES
☐ TOP SECRET ☐ SECRET ☐ CONFIDENTIAL ☐ NONE	☐ Check here if the position includes sensitive ADP-computer duties

PART C - FUNDS INFORMATION

NAME OF FUNDS MANAGER	FUNDS MANAGER CORRESPONDENCE SYMBOL
ACCOUNTING CLASSIFICATION	ACT NUMBER

PART D - REQUESTER CERTIFIES *(Check one only)*

	This person does not hold a certification at this level, or is a GSA employee who is reassigned or promoted from a different position classification series, GSA Region, or GSA C.O. Service or Staff Office. A GSA employee currently cleared at this or a higher national security level does not need to submit investigative forms.
	This person occupies the position, but the sensitivity of the position is changed.
	This is a request for periodic reinvestigation.

REQUESTED BY	SIGNATURE	TITLE	DATE
		CORRESPONDENCE SYMBOL	
THIS REQUEST AUTHORIZED BY	SIGNATURE	HEAD OF C.O. SERVICE OR STAFF OFFICE REGIONAL ADMINISTRATOR, OR DESIGNEE	DATE

GENERAL SERVICES ADMINISTRATION