Please fill out the below information to the best of your ability and with utmost attention to accuracy. This will assist your FSO in staying current with any information that is pertinent to compliance.

* 1. What is your legal name?

2. Please provide today's date.

Date MM / DD / YYYY

3. Have you had a name change within the last year?

- Yes
- No

4. Do you claim or possess dual/multiple citizenships?

- Yes
- No

5. Do you have a passport from another country?

- Yes
- No

6. In the last 7 years, have you consulted with a health care professional regarding an emotional or mental health condition or were you hospitalized for such a condition? (Does not include marital, family, grief counseling or issues adjusting from service in a military combat environment.)

- Yes
- No

7. Do you have any pending criminal or civil charges?

- ◯ Yes
- ◯ No

8. Do you have a felony arrest record?

- ◯ Yes
- ◯ No

9. Have you had an alcohol related arrest in the last 7 years? (Ex. DUI, etc.)

- ◯ Yes
- ◯ No

10. Have you illegally used, been in possession, or distributed narcotics or other controlled substances?

- ◯ Yes
- ◯ No

11. Have you, your spouse, cohabitant or dependent children ever been involved in any hate crimes?

- ◯ Yes
- ◯ No

12. Have you, your spouse, cohabitant or dependent children been involved in any group/organization that espouses extra-legal violence as a legitimate means to achieve an end, such as to overthrow of the US Government?

- ◯ Yes
- ◯ No

13. Do you have financial issues? (Bankruptcy, Delinquent Debt, Delinquent child support, etc)

- ◯ Yes
- ◯ No

14. Do you, your spouse, cohabitant or dependent children have or plan to have any foreign land holdings?

- ◯ Yes
- ◯ No

15. Do you, your spouse, cohabitant or dependent children have any business or financial interests overseas including bank accounts?

- ◯ Yes
- ◯ No

16. Have you traveled outside the United States in the last 7 years?

- ◯ Yes
- ◯ No

17. Do any of your immediate family members currently reside outside the United States?

- ◯ Yes
- ◯ No

18. Do you have, or have you had close and/or continuing contact with a foreign national within the last 7 years with you, or your spouse, or cohabitant are bound by affection, influence, common interests, and/or obligation? This includes associates as well as relatives. (If yes, provide name, relation, country of residence, how you know them & methods of contact)

- ◯ Yes
- ◯ No

Please note that any "yes" answers may be followed up by your organization’s Insider Threat Officer.

* 19. By typing my name below and hitting submit to this information I attest that the above information is true and correct to the best of my knowledge.

I also attest that I have reviewed the Annual Refresher Training Briefing.

Type Name Here: _____

Type Last 4 digits of your Social Security Number Here: _____

That's it! Thank you for your time!