



SCI REQUEST FORM

Privacy Act Statement

Authority: Intelligence Reform and Terrorism Prevention Act of 2004 (Public Law 108-458); Executive Order (E.O.)10450: Security Requirements for Government Employment; Homeland Security Presidential Directive 12 (HSPD-12): Policy for a Common Identification Standard for Federal Employees and Contractors; E.O. 12968: Access to Classified Information; Executive Order 12333: United States Intelligence Activities; E.O. 13381: Strengthening Processes Relating to Determining Eligibility for Access to Classified National Security Information; E.O. 13467: Reforming Processes Related to Suitability for Government Employment, Fitness for Contractor Employees, and Eligibility for Access to Classified National Security Information; and E.O. 13488: Granting Reciprocity on Excepted Service and Federal Contractor Employee Fitness and Reinvestigating Individuals in Positions of Public Trust.

Principal Purpose(s) for Which Information Collected is to be Used: Individuals submitting a USAID Form 566-8, SCI Request Form, are requested to provide the personally identifiable information (PII) specified in Form Section 1. USAID collects this information to determine the individual's eligibility to be awarded a federal security clearance, suitability or fitness determination for federal employment, access to federally owned/controlled facilities, and access to federally owned/controlled information systems.

Routine Uses: Information in your records may be used by USAID for routine uses permitted under system of records notice USAID-008, Personnel Security and Suitability Investigation Records, 78 FR 25414 (October 29, 2013). Permitted routine uses include disclosing to consumer reporting agencies in order to obtain credit reports, federal, international, state, and local law enforcement agencies, U.S. Government Agencies, courts, and Foreign Governments to the extent necessary to further the purposes of an investigation, and the Department of State or other Federal Agencies for purposes of granting physical and/or logical access to federally owned or controlled facilities and/or information systems. Uses and disclosures by USAID may also occur in accordance 5 U.S.C. 552a(b).

Whether Disclosure is Mandatory or Voluntary and Effect on Individual of Not Providing Information: Disclosure of personal information is entirely voluntary. However, failure to provide the requested personal information may result in an individual not being eligible for a federal security clearance, a suitability or fitness determination, or access to federally owned/control facilities or information systems.

SECTION 1: EMPLOYEE INFORMATION (Completed by AMS)

1. APPLICANT NAME (Last, First, Middle)	2. SSN (Last 4)	3. SUBJECT HAS HELD SCI ACCESS IN THE PAST
4. POSITION TITLE		5. POSITION Other:
6. POSITION SEQUENCE NUMBER (IP#)	7. POSITION SENSITIVITY CODE (SEC)	8. PUBLIC TRUST CLASSIFICATION
9. DUTY STATION / OVERSEAS MISSION Duty Station: Overseas Mission:	10. BUREAUS AND INDEPENDENT OFFICE Other:	11. ACTION

12. JUSTIFICATION FOR SCI ACCESS

Other:

13. CLEARANCE LEVEL	14. TYPE OF INVESTIGATION OTHER:	15. DATE OF INVESTIGATION	16. DATE CLEARANCE WAS GRANTED
17. BUREAU CHIEF/AA/OFFICE DIRECTOR		18. PHONE NUMBER	19. EMAIL
20. HR SPECIALIST/EXO/AMS/OFFICE HEAD		21. PHONE NUMBER	22. EMAIL
23. HR SPECIALIST/EXO/AMS/OFFICE HEAD SIGNATURE			24. DATE
SECTION 2: SECURITY APPROVAL (Completed by SEC)			
25. SEC APPROVING OFFICIAL	26. PHONE NUMBER	27. EMAIL	
28. SEC APPROVING OFFICIAL SIGNATURE			29. DATE

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Instructions for Completion

(This form must be completed and submitted electronically)

SECTION 1 - EMPLOYEE INFORMATION (Completed by AMS)

1. **EMPLOYEE NAME:** Enter the employee's full legal name--the last name first, first name, then middle name.
2. **SSN:** Enter the last 4 digits of the employee's Social Security number.
3. **PREVIOUS SCI:** If the employee has had SCI in the past, check YES; if not, check NO.
4. **POSITION TITLE:** Enter the employee's position title.
5. **POSITION:** Refer to the Agency's staffing pattern and enter the position description.
6. **POSITION SEQUENCE NUMBER (IP#):** Refer to the Agency's staffing pattern and enter the position sequence number.
7. **POSITION SENSITIVITY CODE (SEC):** Always Special Sensitive.
8. **PUBLIC TRUST CLASSIFICATION (PT):** Always High.
9. **DUTY STATION / OVERSEAS MISSION:** Select the Duty Station and/or Overseas Mission for the employee's position.
10. **BUREAUS AND INDEPENDENT OFFICES:** Select the Bureau or Office the employee will be stationed at AID/Washington.
11. **ACTION:** Always Initial.
12. **JUSTIFICATION FOR SCI ACCESS:** Select a justification explaining why the applicant requires SCI access to perform in their position.
13. **CLEARANCE LEVEL:** Always Top Secret.
14. **TYPE OF INVESTIGATION:** Select the current investigation conducted on the employee.
15. **DATE OF INVESTIGATION:** Enter the completion date of the most recent investigation conducted on the employee.
16. **DATE CLEARANCE WAS GRANTED:** Enter the date the most recent clearance was granted.
17. **BUREAU CHIEF/AA/OFFICE DIRECTOR:** Enter the name of the Bureau Chief, AA or Office Director.
18. **PHONE NUMBER:** Enter the phone number of the Bureau Chief, AA or Office Director related to the request.
19. **EMAIL:** Enter the email of the Bureau Chief, AA or Office Director related to the request.
20. **AMS OFFICER:** Enter the name of the AMS Officer that is submitting the request.
21. **PHONE NUMBER:** Enter the phone number of the AMS Officer submitting the request.
22. **EMAIL:** Enter the email of the AMS Officer that is submitting the request.
23. **AMS OFFICER SIGNATURE:** Electronic signature of the AMS Officer that is submitting the request
24. **DATE:** Enter the date that the AMS Officer submits the request.

AMS Officer should email completed request form to SEC-SCIRequests@usaid.gov

SECTION 2: SECURITY APPROVAL (Completed by SEC)

25. **SEC APPROVING OFFICIAL:** Enter name of SEC Approving Official who verified clearance information.
26. **PHONE NUMBER:** Enter the phone number of the SEC Approving Official verifying clearance information.
27. **Email:** Enter the email of the SEC Approving Official verifying clearance information.
28. **SEC APPROVING OFFICIAL SIGNATURE:** Electronic signature of the SEC Approving Official who verified clearance information.
29. **DATE:** Enter the date the clearance information was verified.

All disapprovals should be returned to the requestor