

SPAWARSYSCEN NORFOLK BADGE REQUEST

The purpose of this form is to request a permanent SPAWARSYSCEN Norfolk badge. Access to specific areas will be granted based on the information provided. After completion of Sections I and II, forward to the Security Office for processing.

Section I

NAME (Last, First, M.I.)		Code/Company	SSN
<input type="checkbox"/> CIVILIAN <input type="checkbox"/> MILITARY <input type="checkbox"/> CONTRACTOR	Phone Number / Extension: (757) _____		Contract Number: _____ Expiration / PRD _____
Type of Request: <input type="checkbox"/> New <input type="checkbox"/> Renewal <input type="checkbox"/> Change	Access Requested: (Check all that apply) <input type="checkbox"/> General Spaces (Z133) <input type="checkbox"/> Bldg X70 <input type="checkbox"/> Computer Room A (justify below) <input type="checkbox"/> Computer Room B (justify below) <input type="checkbox"/> Computer Room C (justify below) <input type="checkbox"/> SIPRNET Room (justify below)		Working Hours: (Check all that apply) <input type="checkbox"/> Monday – Friday (Regular hours) <input type="checkbox"/> Monday – Friday (24 Hours) <input type="checkbox"/> Weekends / Holidays <input type="checkbox"/> Other (Specify): _____
Reason For Request:			
Justification for Computer Room Access:			
Justification for SIPRNET Room Access:			

Section II Approval Signatures

MILITARY / CIVILIAN		CONTRACTOR	
Division Head:	Date:	Contracts or COR:	Date:
Department / Director:	Date:	Division Head:	Date:
ISSM:		Department Director:	Date:
Security Office:	Date:	ISSM:	Date:
		Security Office:	Date:

Section III Completed By Security Office

<input type="checkbox"/> Badge Issued <input type="checkbox"/> Computer Entry SSCN Badge Number:	<input type="checkbox"/> Prox Issued <input type="checkbox"/> CAC Form Issued	<input type="checkbox"/> Badge Issued <input type="checkbox"/> Computer Entry SSCN Badge Number:	<input type="checkbox"/> Prox Issued <input type="checkbox"/> CAC Form Issued
---	--	---	--

