

APPLICATION FOR INSTALLATION/BASE PASS (USFK FORM 37-E) (USFK REG 190-7) SEE PRIVACY ACT STATEMENT ON PAGE 2	DATE <input style="width:100%; height: 20px;" type="text"/>
---	--

SECTION I - TO BE FILLED OUT BY SPONSOR AND APPLICANT (TYPE OR PRINT)

1. NAME (LAST, FIRST, MIDDLE) <input style="width:100%; height: 20px;" type="text"/>	2. SEX <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	3. KID/SSN OR PASSPORT <input style="width:100%; height: 20px;" type="text"/>
---	--	--

4. DOB (YYYYMMDD) <input style="width:100%; height: 20px;" type="text"/>	5. HEIGHT <input style="width:100%; height: 20px;" type="text"/>	6. WEIGHT <input style="width:100%; height: 20px;" type="text"/>	7. HAIR <input style="width:100%; height: 20px;" type="text"/>	8. EYES <input style="width:100%; height: 20px;" type="text"/>	9. GLASSES <input type="checkbox"/> YES <input type="checkbox"/> NO	10. POB (CITY/COUNTRY) <input style="width:100%; height: 20px;" type="text"/>
---	---	---	---	---	--	--

11. ADDRESS & PHONE NO.

11.a. CURRENT ADDRESS & PHONE NO. (ST NO., CITY & PROVINCE) <input style="width:100%; height: 40px;" type="text"/>	11.b. PERMANENT ADDRESS & PHONE NO. (ST NO., CITY & PROVINCE) <input style="width:100%; height: 40px;" type="text"/>
--	--

12. ACCESS REQUIREMENTS *(If USFK or EUSA-wide; Special processing required)*

12.a. ACCESS AREA <input style="width:100%; height: 20px;" type="text"/>	12.b. FPCON (A,B,C,D) <input style="width:100%; height: 20px;" type="text"/>	12.c. ESCORT PRIVILIGES Pers <input type="checkbox"/> Vehicle <input type="checkbox"/> YES <input type="checkbox"/> NO	12.d. HOURS <input style="width:100%; height: 20px;" type="text"/>	12.e. DAYS <input style="width:100%; height: 20px;" type="text"/>
---	---	---	---	--

12.f. PASS TYPE <input type="checkbox"/> PERMANENT <input type="checkbox"/> TEMPORARY	12.g. STATUS <input type="checkbox"/> INITIAL <input type="checkbox"/> RENEWAL <input type="checkbox"/> UPDATE
--	---

13. SPONSOR INFORMATION

13.a. SPONSOR (FULL NAME/RANK or GRADE) <input style="width:100%; height: 20px;" type="text"/>	13.b. SPONSOR SSN <input style="width:100%; height: 20px;" type="text"/>	13.c. SPONSOR ORG & PHONE NO. <input style="width:100%; height: 20px;" type="text"/>
---	---	---

14. JUSTIFICATION FOR PASS OR VISIT (ATTACH COPY OF KID CARD OR PASSPORT AND PREVIOUS PASS)
(FPCON Level, escort authorization, Access Area, and days/hours of access must be addressed in justification)

SPONSOR STATEMENT OF UNDERSTANDING

I fully understand My responsibilities as a sponsor for the control of the person identified at the top of this application. All information submitted is true and correct to the best of my knowledge. I further understand that it is my responsibility to ensure that I notify the Installation Pass & ID Office of any change in my status as a sponsor or any knowledge of misuse of the pass to be issued. It is my responsibility to ensure that the pass is returned to the Installation Pass & ID Office if it is not renewed, upon termination of employment or services being provided; or, for short term visitors or personal service employees, prior to my DEROS. Failure to comply with these requirements may result in adverse administrative or legal action against me.

15. SPONSOR SIGNATURE	SignaturDe Field <input style="width:100%; height: 20px;" type="text"/>	DATE <input style="width:100%; height: 20px;" type="text"/>
-----------------------	---	---

SECTION II - TO BE FILLED OUT BY DOD SPONSOR, CPOC OR USACCK

NAME (LAST, FIRST, MIDDLE) (FROM BLOCK 1)		KID/SSN OR PASSPORT (FROM BLOCK 3)
16. GRADE/RANK	17. JOB TITLE	18. DATE OF EMPLOYMENT
19. UNIT/AGENCY/COMPANY ADDRESS/ PHONE NO.		20. CONTRACTING OFFICER/PHONE NO.
		21. CONTRACT NO.
		22. CONTRACT PERIOD (YYYYMMDD-YYYYMMDD)

SECTION III - REQUESTING AUTHORITY

I HAVE REVIEWED THIS APPLICATION AND ITS SUPPORTING DOCUMENTATION AND I ENSURE IT MEETS THE PROVISIONS OF USFK REG 190-7. Recommend <input type="checkbox"/> Approval <input type="checkbox"/> Disapproval <input type="checkbox"/>	SIGNATURE, TYPED NAME, GRADE, DUTY TITLE Signature Field

SECTION IV - TO BE FILLED OUT BY PASS & ID OFFICE

23. BACKGROUND CHECK WITHIN LAST 3 YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO <table style="width:100%;"> <tr> <td style="width:30%;"></td> <td style="width:20%;">DATE REQUESTED</td> <td style="width:20%;">DATE COMPLETED</td> <td style="width:30%;"></td> </tr> <tr> <td><input type="checkbox"/> 23.a. Local Law Enforcement</td> <td><input type="text"/></td> <td><input type="text"/></td> <td></td> </tr> <tr> <td><input type="checkbox"/> 23.b. KNP</td> <td><input type="text"/></td> <td><input type="text"/></td> <td></td> </tr> <tr> <td><input type="checkbox"/> 23.c. US Embassy (if applicable)</td> <td><input type="text"/></td> <td><input type="text"/></td> <td></td> </tr> </table>		DATE REQUESTED	DATE COMPLETED		<input type="checkbox"/> 23.a. Local Law Enforcement	<input type="text"/>	<input type="text"/>		<input type="checkbox"/> 23.b. KNP	<input type="text"/>	<input type="text"/>		<input type="checkbox"/> 23.c. US Embassy (if applicable)	<input type="text"/>	<input type="text"/>		24. DEROGATORY INFORMATION <input type="checkbox"/> YES <input type="checkbox"/> NO (If Yes) Date Provided Approval Authority <input type="text"/>
	DATE REQUESTED	DATE COMPLETED															
<input type="checkbox"/> 23.a. Local Law Enforcement	<input type="text"/>	<input type="text"/>															
<input type="checkbox"/> 23.b. KNP	<input type="text"/>	<input type="text"/>															
<input type="checkbox"/> 23.c. US Embassy (if applicable)	<input type="text"/>	<input type="text"/>															
26. IS APPLICANT A DESIGNATED COUNTRY PERSON (DCP) ? <input type="checkbox"/> YES <input type="checkbox"/> NO	26. IS THIS PASS APPLICATION IAW USFK REG 190-7? <input type="checkbox"/> YES <input type="checkbox"/> NO																
27. DATE PASS ISSUED <input type="text"/>	28. PASS EXPIRATION DATE <input type="text"/>																

I HAVE REVIEWED THIS APPLICATION TO ENSURE INFORMATION AND DOCUMENTATION REQUIRED FOR AN APPROVAL DETERMINATION ARE ENCLOSED AND IAW USFK REG 190-7.

29. SIGNATURE OF PASS & ID SECTION CHEIF OR NCOIC	DATE	
Signature Field	<input type="text"/>	<input type="text"/>

SECTION V - APPROVAL AUTHORITY

I HAVE REVIEWED THIS APPLICATION AND ITS SUPPORTING DOCUMENTATION AND I ENSURE IT MEETS THE PROVISIONS OF USFK REG 190-7. <input type="checkbox"/> Approval <input type="checkbox"/> Disapproval	SIGNATURE, TYPED NAME, GRADE, DUTY TITLE Signature Field

PRIVACY ACT STATEMENT

- 1. AUTHORITY:** Title 10, USC, 3012(g).
- 2. PRINCIPAL PURPOSE(S):** Use of Social Security Number of Korean Identification number is an additional means of identification of individuals.
- 3. ROUTINE USES:** An individual's Social Security Number or Korean Identification number, together with name and other personnel identifying data, may be used for the collection of derogatory information on file within DOD, host nation, and other Law Enforcement Agencies in determining an individual's suitability for access to USFK installations in Korea.
- 4. MANDATORY OR VOLUNTARY DISCLOSE AND EFFECT ON INDIVIDUALS NOT PROVIDING INFORMATION:** Disclosure of information is voluntary. Failure to provide required data may result in denial of access to USFK installations.

INSTRUCTIONS FOR COMPLETING USFK FORM 82-E (APPLICATION FOR INSTALLATION PASS)

SECTION I - Sponsor or Applicant WILL:

- Block 1. Input last name, first name, and middle name (no initials)
- Block 2. Mark the check box of the applicant's sex (Female or Male)
- Block 3. Input the applicant's Korean Identification Number (KID), Social Security Number (SSN), or Passport Number
- Block 4. Input the Date of Birth (example: 19540615) year, month, date
- Block 5. Input the height in inches (example: 72)
- Block 6. Input the weight in pounds (example: 165)
- Block 7. Input the hair color (example: Brown, blonde, red) If the applicant has no hair, input the wording "None"
- Block 8. Input the eye color (example: blue, brown, black)
- Block 9. Mark the check box yes if the applicant wears glasses or mark the check box no if the applicant does not wear glasses
- Block 10. Input the applicant's place of birth (example: Pyongyang, Korea)
- Block 11.a. Input the applicant's current address and phone number if different from permanent address and phone number. If current address and phone number is the same as permanent address and phone number then input "Same as Block 11.b."
- Block 12.a. Input the Area, Area(s) not more than two areas, USFK-wide, or EUSA-wide (example: for one installation Yongsan) (example: for one area Area II) (example: for more than two areas would be EUSA-wide) (example: for more than two areas would be USFK-wide)
- Block 12.b. Input the Force Protection Condition (FPCON) required for the applicant
- Block 12.c. Input the number of persons authorized to escort not to exceed 3 persons and input either yes or no for authorized to escort one vehicle or not
- Block 12.d. Input the hours authorized to access (example: 0800-2100)
- Block 12.e. Input the days authorized to access (example: Mon-Fri)
- Block 12.f. Mark the pass type
- Block 12.g. Mark the status of the application
- Block 13.a. Input the Sponsor's full name/rank or grade
- Block 13.b. Input the sponsor's social security number
- Block 13.c. Input the sponsor's organization and phone number
- Block 14. Input justification that addresses FPCON, escort authorization, access area, and hours/days as a minimum
- Block 15. Print and sponsor sign or click on signature button to sign digitally and input the date signed

SECTION II - DoD Sponsor, CPOC or USACCK will:

- Top of Page - Input from Block 1 the applicant's Last Name, First Name, and Middle Name (No Initials) and input from Block 3 the applicant's Korean Identification Number, Social security Number, or Passport Number
- Block 16. Input the applicant's grade and rank
- Block 17. Input the applicant's job title
- Block 18. Input the applicant's date of employment
- Block 19. Input the applicant's unit/company address and phone number
- Block 20. Input Contracting Officer name and phone number
- Block 21. Input the applicant's contract number
- Block 22. Input applicant's contract period (example: 20080112-20081223)

SECTION III - Requesting Authority will:

Recommend approval or disapproval and print and sign or click the signature button to digitally sign

SECTION IV - Pass and ID Office will:

- Block 23. Mark yes or no if the background check has been within 3 years or not
- Block 23.a. Input local law enforcement date requested and date completed
- Block 23.b. Input KNP date requested and date completed
- Block 23.c. Input US Embassy date requested and date completed
- Block 24. Mark yes or no if there is derogatory or not
- Block 25. Mark yes or no if applicant is designated country person or not
- Block 26. Mark yes or no if the applicant's packet has been processed IAW 190-7 or not
- Block 27. Input the date pass was issued (Date must be YYYYMMDD format)
- Block 28. Input the pass expiration date (Date must be YYYYMMDD format)
- Block 29. Print and sign or click on signature button and sign digitally and input the date signed (Date must be YYYYMMDD format)

SECTION V - Approval Authority will:

Mark approve or disapprove and print or click on signature button and sign digitally