

## **Badge Process**

1. Complete this application.
2. Find the list of acceptable documents that you may use to provide identity and work authorization on the last page of this application and locate **original unaltered** documents.
3. Make a check payable to CVRA or the Chippewa Valley Regional Airport. **An AOA badge fee is \$25 and a SIDA badge fee is \$50** (*subject to change*) payable at the time you apply for the badge. Credit Card payment is also accepted (*Subject to 2.35% service fee with a \$1 minimum for debit/credit*).
4. Call (715) 839-6241 or email [admin@chippewavalleyairport.com](mailto:admin@chippewavalleyairport.com) to make a badge application appointment. Bring your completed application, acceptable identity documents and payment to your appointment. Your fingerprints will be captured and your photo will be taken at the appointment.
5. Badge applications usually take at least 3 business days for approval. Call the Airport at (715) 839-6241 to check on your status after 5 days and make arrangement to schedule your training and pick up your badge. You have 30 days from the application date to pick up your badge. If you do not pick up your badge within 30 days you will have to repeat the entire application process and repay the fee.
6. Your badge will be valid for 1 year. Up to 60 days before your badge expires you will complete a new application form, pay a renewal fee (currently \$10 for AOA and \$20 for SIDA), and attend an appointment to have an updated badge issued.

## **Directions for Completing the Badge Application**

### **Section I – SIDA Badge application only – Disqualifying Offenses**

1. SIDA Badge applicants must print name, sign, and date.

### **Section II – Applicant Information**

1. All applicants must complete this section.
2. Do not complete the “If born outside the United States” section unless it pertains to you.

### **Section III – ID Rules & Requirements**

1. All applicants must print name, sign, and date.

### **Section IV – Social Security Number Certification**

1. All applicants must complete all boxes in this section.

### **Section V – Authorized Signatory**

1. This will be completed by your Authorized Signatory.
2. Your Authorized Signatory is either:
  - a. Your airport tenant employer, or
  - b. Airport organization on the airfield, or
  - c. The airport if you are a tenant (i.e. rent a hangar).

### **Section VI – Privacy Act Notice**

1. All applicants must print name, sign, and date.

### **Section VII – List of Acceptable Documents**

1. Review the list of acceptable documents on the last page of this application before coming to your appointment.

# CHIPPEWA VALLEY REGIONAL AIRPORT SECURITY BADGE APPLICATION

**IMPORTANT:** SECTION I **must** be reviewed and completed prior to completing SECTIONS II through V.  
If you have been convicted or found “not guilty by reason of insanity” of any of the crimes listed in SECTION I, for the SIDA application, you cannot be granted unescorted access to airport restricted areas and will not be issued an airport ID.

**Reason for Request:** *(Please Check One)*     **New Issue**     **Renewal**     **Replacement**

## SECTION I: CRIMINAL HISTORY DECLARATION

Disqualifying Crimes as defined by CFR Part 1542.209. A conviction (within the last 10 years) involving:

- |  |  |
|--|--|
| <ol style="list-style-type: none"> <li>1. Forgery of certificates, false marking of aircraft, and other aircraft registration violation; 49 U.S.C. 46306</li> <li>2. Interference with air navigation; 49 U.S.C. 46308</li> <li>3. Improper transportation of a hazardous material; 49 U.S.C. 46312</li> <li>4. Aircraft piracy; 49 U.S.C. 46502</li> <li>5. Interference with flight crew members or flight attendants; 49 U.S.C. 46504</li> <li>6. Commission of certain crimes aboard aircraft in flight; 49 U.S.C. 46506</li> <li>7. Carrying a weapon or explosive aboard an aircraft; 49 U.S.C. 46505</li> <li>8. Conveying false information and threats; 49 U.S.C. 46507</li> <li>9. Aircraft piracy outside the special aircraft jurisdiction of the United States; 49 U.S.C. 46502(b)</li> <li>10. Lighting violations involving transporting controlled substances; 49 U.S.C. 46315</li> <li>11. Unlawful entry into an aircraft or airport area that serves air carriers or foreign air carriers contrary to established security requirements; 49 U.S.C. 46314</li> <li>12. Destruction of an aircraft or aircraft facility; 18 U.S.C. 32.</li> <li>13. Murder.</li> <li>14. Assault with intent to murder.</li> <li>15. Espionage.</li> <li>16. Sedition.</li> </ol> | <ol style="list-style-type: none"> <li>17. Kidnapping or hostage taking</li> <li>18. Treason.</li> <li>19. Rape or aggravated sexual abuse.</li> <li>20. Unlawful possession, use, sale, distribution, or manufacture of an explosive or weapon.</li> <li>21. Extortion.</li> <li>22. Armed or felony unarmed robbery.</li> <li>23. Distribution of, or intent to distribute, a controlled substance.</li> <li>24. Felony arson.</li> <li>25. Felony involving a threat.</li> <li>26. Felony involving - (i) Willful destruction of property; (ii) Importation or manufacture of a controlled substance; (iii) Burglary; (iv) Theft; (v) Dishonesty, fraud, or misrepresentation; (vi) Possession or distribution of stolen property; (vii) Aggravated assault; (viii) Bribery; or (ix) Illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than 1 year.</li> <li>27. Violence at international airports; 18 U.S.C. 37.</li> <li>28. Conspiracy or attempt to commit any of the criminal acts listed in this paragraph.</li> </ol> |
|--|--|

I certify that in the last 10 years I have not been convicted or found not guilty by reason of insanity of any of the above named disqualifying offenses. I acknowledge my continuing obligation to disclose to the airport if I am convicted of any disqualifying criminal offense that occurs while I have unescorted access authority.

Applicant's Full Name (Printed): \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## SECTION II: APPLICANT INFORMATION

Full Last Name		Full First Name			Full Middle Name		
Maiden Name, Name Changes, or Aliases (if applicable)					Social Security Number		
Current Address				City	State	Zip Code	
Phone Number		E-Mail Address			Country of Birth		
State or Territory of Birth	Country of Citizenship	Driver's License Number		State	Expiration (MM/YY)		
Date of Birth (MM/DD/YYYY)	Height (ft/in)	Weight (lbs)	Gender	Eye Color	Hair Color	Race	
<b>Employer/Affiliation</b>		<b>If born outside of the United States or its territories, you must provide associated documentation numbers applicable to the following below:</b>					
Alien Registration Number				Non-Immigrant VISA and Control Number			
I-94 Arrival/Departure Number				Certificate of Naturalization Number			
Certification of Birth/Birth Abroad				Certification of U.S. Citizenship			

### SECTION III: ID RULES & REQUIREMENTS

1. I will comply with the access control system in place and use my ID each time I enter a restricted area. While I am in a restricted area, I will display my ID visibly above the waist.
2. I will challenge those persons found in restricted areas that are not displaying proper identification and will immediately report such individuals to the City of Eau Claire Police Department or Airport Administration.
3. I will not permit unauthorized persons to enter restricted areas without challenging those persons and notifying the City of Eau Claire Police Department or Airport Administration.
4. I will not permit others to enter/"piggyback" through doors and gates I have accessed unless they are under my escort.
5. I will not escort any person who has been issued a Chippewa Valley Regional Airport SIDA or AOA badge.
6. I will ensure that persons under my escort in restricted areas remain within my sight and control at all times.
7. I will not leave any open or unsecured gate unattended.
8. I will not leave any door or gate unsecured after use.
9. I will enter only those areas I am authorized to enter.
10. I will not use my ID to bypass TSA screening when departing on flights from the Chippewa Valley Regional Airport terminal.
11. I will not permit other persons to use or wear my ID.
12. Should my SIDA or AOA badge become lost, stolen, or mutilated, I will make a report immediately to my supervisor and Airport Administration.
13. If my badge expires, I will immediately return it to the Airport ID Badging Office either for renewal or surrender as appropriate.
14. The ID badge is the property of the Chippewa Valley Regional Airport and I will surrender it to the airport operator on demand or upon termination.
15. I understand all of these rules, those covered in my airport security class, and that violation of one or more of these rules may lead to fines or criminal charges and/or suspension or revocation of my ID.
16. I will comply with all federally-issued Security Directives (SD) and Security Regulations; failure to comply may result in monetary fines and/or suspension or revocation of my ID.
17. If my Airport ID Badge is revoked due to a violation of Airport Security Requirements, I understand that my information will be added to the Centralized Revocation Database (CRD) for a period of 5 years.
18. SIDA Airport ID Badge Holders Screening Notice: Any employee holding a credential granting access to a Security Identification Display Area may be screened at any time while gaining access to, working in, or leaving a Security Identification Display Area.
19. I will not post photos of my badge online.

Applicant's Full Name (Printed): \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### SECTION IV: CERTIFICATION

The information I have provided is true, complete, and correct to the best of my knowledge and belief and is provided in good faith. I understand that a knowing and willful false statement can be punished by fine or imprisonment or both (see Section 1001 or Title 18 of the United States Code). I authorize the Social Security Administration to release my Social Security Number and full name to the Transportation Security Administration, Enrollments Services and Vetting Program, Attention: Vetting Programs (TSA-10)/Aviation Worker Program, 6595 Springfield Center Drive, Springfield, VA 20598-6010. I am the individual to whom the information applies and want this information released to verify that my SSN is correct. I know that if I make any representation that I know is false to obtain information from Social Security records, I could be punished by a fine or imprisonment or both.

Applicant's Full Name (Printed): \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

**NOTE:** A copy of the criminal record received from the FBI will be provided to you upon receipt of a written request to the Airport Security Coordinator. Please write for all inquiries and questions about CHRC results:

49 CFR Part 1542 Employees (Non-Air Carrier):  
Airport Security Coordinator  
Chippewa Valley Regional  
3800 Starr Avenue  
Eau Claire, WI 54703

49 CFR Part 1544 Employees (Air Carrier):  
Notify your Air Carrier

# SECTION V: AUTHORIZED SIGNATORY

Company/Affiliation/Hangar	Authorized Signatory Name	Phone Number
Address (Street, City, State, Zip Code)		
Authorized Signatory Email Address		

**Badge Type:**  SIDA/SECURED/STERILE (RED)  
 AOA (BLUE)

**Gate Access:**  14 - North Hangar Area (Davey Street)  
 2 - South Hangar Area Gate (K-Row)  
 8 - Airport Maintenance Facility Gate  
 11 - FBO/ARFF Gate  
 16 - Fuel Farm Gate (Land Side)  
 13 - M-Row North Gate  
 9 - EAA Pedestrian Gate

**Privileges:**

Escort Authority Required  
 Is an Authorized Signatory

I certify that this applicant is actively affiliated with the above listed entity and that a specific need exists for providing this applicant with unescorted access authority to the Security Identification Display Area (SIDA)/Secured Area or AOA at the Chippewa Valley Regional Airport. This individual applicant acknowledges the security responsibilities under 49 CFR 1540.105(a). I understand that the applicant's Airport ID Badge will be returned immediately upon request, termination, or when access is no longer needed.

Authorized Signatory Full Name (Printed): \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\*FOR OFFICE USE ONLY\*\*\***

<b>ID Number:</b> _____	<b>P.I.N.</b> _____	<b>Rap Back (If Applicable)</b> _____	<b>Rap Back Valid To:</b> ____/____/____
-------------------------	---------------------	---------------------------------------	--

**Fingerprint Record Transmitted/Taken:**

I.D. Verification/Authorization to Work: Type #1: \_\_\_\_\_ Type#2: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Second Check of Paperwork: \_\_\_\_\_

**Fingerprint Response Received:**  Approved  Denied Initials: \_\_\_\_\_ Date: \_\_\_\_\_ CHRC# \_\_\_\_\_

**TSA Threat Assessment Received:**  Approved  Denied Initials: \_\_\_\_\_ Date: \_\_\_\_\_

**Notification of Authorization:**  Approved  Denied Initials: \_\_\_\_\_ Date: \_\_\_\_\_

I certify that the listed applicant satisfactorily completed airport security training.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I certify that the listed applicant has completed the above selected Chippewa Valley Regional Airport driver's training.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Badge Issued:**

Date Issued: \_\_\_\_\_ Issued By: \_\_\_\_\_ Expiration: \_\_\_\_\_

Date Returned: \_\_\_\_\_ Received By: \_\_\_\_\_ Date Lost: \_\_\_\_\_

Reason for Badge Returned: \_\_\_\_\_

**Key Issued:** Date Issued: \_\_\_\_\_ Date Returned: \_\_\_\_\_ Key Number: \_\_\_\_\_ Access: \_\_\_\_\_

## SECTION VI: PRIVACY ACT NOTICE

The Privacy Act of 1974  
5 U.S.C. 522 a(e)(3)

**Authority:** 6 U.S.C. § 1140, 46 U.S.C. § 70105; 49 U.S.C. §§ 106, 114, 5103a, 40103(b)(3), 40113, 44903, 44935-44936, 44939, and 46105; the Implementing Recommendations of the 9/11 Commission Act of 2007, § 1520 (121 Stat. 444, Public Law 110-53, August 3, 2007); FAA Reauthorization Act of 2018, §1934(c) (132 Stat. 3186, Public Law 115-254, Oct 5, 2018), and Executive Order 9397, (November 22, 1943) as amended.

**Purpose:** The Department of Homeland Security (DHS) will use the information to conduct a security threat assessment. Your fingerprints and associated information will be provided to the Federal Bureau of Investigation (FBI) for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor system including civil, criminal, and latent fingerprint repositories. The FBI may retain your fingerprints and associated information in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI. DHS will also transmit your fingerprints for enrollment into US-VISIT's Automated Biometrics Identification System (IDENT).

DHS will also maintain a national, centralized revocation database of individuals who have had airport- or aircraft operator-issued identification media revoked for noncompliance with aviation security requirements. DHS has established a process to allow an individual whose name is mistakenly entered into the database to correct the record and have the individual's name expunged from the database. If an individual who is listed in the centralized database wishes to pursue expungement due to mistaken identity, the individual must send an email to TSA at [Aviation.workers@tsa.dhs.gov](mailto:Aviation.workers@tsa.dhs.gov).

**Routine Uses:** In addition to those disclosures generally permitted under 5 U.S.C. 522 a(b) of the Privacy Act, all or a portion of the records or information contained in this system may be disclosed outside DHS as a routine use pursuant to 5 U.S.C. 522a(b)(3) including with third parties during the course of a security threat assessment, employment investigation, or adjudication of a waiver or appeal request to the extent necessary to obtain information pertinent to the assessment, investigation, or adjudication of your application or in accordance with the routine uses identified in the TSA system of records notice (SORN) DHS/TSA 002, Transportation Security Threat Assessment System. For as long as your fingerprints and associated information are retained in NGI, your information may be disclosed pursuant to your consent or without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the Routine Uses for the NGI system and FBI's Blanket Routine Uses.

**Disclosure:** Pursuant to § 1934(c) of the FAA Reauthorization Act of 2018, TSA is required to collect your SSN on applications for Secure Identification Display Area (SIDA) credentials. For SIDA applications, failure to provide this information will result in denial of a credential. For other aviation credentials, although furnishing your SSN is voluntary, if you do not provide the information requested, DHS may be unable to complete your security threat assessment.

I have read and understand this Privacy Act Notice.

Applicant's Full Name (Printed): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# LISTS OF ACCEPTABLE DOCUMENTS

All documents containing an expiration date must be unexpired.

\* Documents extended by the issuing authority are considered unexpired.

**Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.**

LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity	AND	LIST C Documents that Establish Employment Authorization
<ol style="list-style-type: none"> <li>1. U.S. Passport or U.S. Passport Card</li> <li>2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</li> <li>3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa</li> <li>4. Employment Authorization Document that contains a photograph (Form I-766)</li> <li>5. For an individual temporarily authorized to work for a specific employer because of his or her status or parole:                             <ol style="list-style-type: none"> <li>a. Foreign passport; and</li> <li>b. Form I-94 or Form I-94A that has the following:                                     <ol style="list-style-type: none"> <li>(1) The same name as the passport; and</li> <li>(2) An endorsement of the individual's status or parole as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.</li> </ol> </li> </ol> </li> <li>6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI</li> </ol>		<ol style="list-style-type: none"> <li>1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>3. School ID card with a photograph</li> <li>4. Voter's registration card</li> <li>5. U.S. Military card or draft record</li> <li>6. Military dependent's ID card</li> <li>7. U.S. Coast Guard Merchant Mariner Card</li> <li>8. Native American tribal document</li> <li>9. Driver's license issued by a Canadian government authority</li> <li style="text-align: center;"><b>For persons under age 18 who are unable to present a document listed above:</b></li> <li>10. School record or report card</li> <li>11. Clinic, doctor, or hospital record</li> <li>12. Day-care or nursery school record</li> </ol>		<ol style="list-style-type: none"> <li>1. A Social Security Account Number card, unless the card includes one of the following restrictions:                             <ol style="list-style-type: none"> <li>(1) NOT VALID FOR EMPLOYMENT</li> <li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li> <li>(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION</li> </ol> </li> <li>2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)</li> <li>3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal</li> <li>4. Native American tribal document</li> <li>5. U.S. Citizen ID Card (Form I-197)</li> <li>6. Identification Card for Use of Resident Citizen in the United States (Form I-179)</li> <li>7. Employment authorization document issued by the Department of Homeland Security</li> </ol>

### Acceptable Receipts

May be presented in lieu of a document listed above for a temporary period.

<ul style="list-style-type: none"> <li>• Receipt for a replacement of a lost, stolen, or damaged List A document.</li> <li>• Form I-94 issued to a lawful permanent resident that contains an I-551 stamp and a photograph of the individual.</li> <li>• Form I-94 with "RE" notation or refugee stamp issued to a refugee.</li> </ul>	OR	<p>Receipt for a replacement of a lost, stolen, or damaged List B document.</p>	<p>Receipt for a replacement of a lost, stolen, or damaged List C document.</p>
--	----	---	---