

**CAMP NAVAJO**  
**REQUEST FOR LIMITED AREA ACCESS**

Date of Request: (YYYY-MM-DD)

Company/Organization:

Name/Title/Contact Info for Company Manager/Supervisor:

Co. Name

Name:

Address

Title:

City  State  Zip

Phone 1:  Phone 2:

Country

email:

**Manager/Supervisor Signature:** I certify the person needing authorization has not and does not display character traits that raise significant doubts as to their honesty or stability.

**Person needing authorization:**

Name of Applicant (Last, First MI):

Date of Birth: (YYYY-MM-DD):

Contact Phone Number:

Social Security Number or DOD ID:

**DISCLOSURE:** The providing of a Social Security Number is voluntary, however, your application for access may not be able to be processed without that information.

Government Photo ID that will be provided at Entry:   
(Driver's License, Passport, etc - Include number, state and expiration date)

**Purpose/Activity Requiring Access:**

**Dates Access Requested:**

(May not exceed one (1) year)

Start Date: (YYYY-MM-DD)

End Date: (YYYY-MM-DD)

**Type of Access Requested:**

(Check one only)

Escort Required (ER)

No Escort Required (NER)

Approved Escort (AE)

**Documentation Attached:**

Secret or Above Clearance

DD Form 369 (Mar 2007)

Other:

**Camp Navajo Contact:**

Camp Navajo Division/ Department:

Camp Navajo Contact Person (Must be a Camp Navajo Employee):

Camp Navajo Contact Signature: By signing, you are requesting access as requested above for legitimate/approved purposes.

**CAMP NAVAJO SECURITY USE ONLY**

Date/Time Recd: \_\_\_\_\_

Review by: \_\_\_\_\_ Lvl of Clearance: \_\_\_\_\_

Security office records check by: \_\_\_\_\_ Adj. Date: \_\_\_\_\_

DD 369 Required?

NDA Signed:  Yes  No

Date/Time DD 369 Submted: \_\_\_\_\_ US Access:  Yes  No

Date/Time DD 369 Results Rcd.: \_\_\_\_\_

Approved  Not Approved  Apprvd w/ Mod

Modifications:

Signed By \_\_\_\_\_

Date/Time Requestee's Supervisor Notified \_\_\_\_\_