



## ACCESS MEDIA APPLICATION INSTRUCTIONS

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- STEP 1** – Fill out the Access Media Application entirely. Must be filled out in **BLUE ink**. Do not leave any blank sections, sections which do not apply place an “N/A” (not applicable).
- STEP 2** – Turn in the completed application to the Access Control Office located on the 1<sup>st</sup> floor of the main terminal, along with the I-9 acceptable identification. Applications are accepted on Tuesday, Thursday, and Friday from 8:30am to 4:30pm. Full payment of badge fees (\$97.00) is due at this time.
- STEP 3** – Fingerprints will be taken to perform a background check on applicant. Results may take from 72 hours to two (2) weeks.
- STEP 4** – After results have been received, the applicant will be notified and scheduled to attend SIDA class training. SIDA trainings are held every Wednesday’s at 10:00am at the Airport Police’s conference room located in the same offices were applicant applied.

**After completion of all requirements, badge privileges will be issued.**



OFFICE USE ONLY			

**Laredo International Airport**  
**ACCESS CONTROL MEDIA APPLICATION**  
**BADGING AND FINGERPRINTING OFFICE DIAL (956)795-2000**  
**EXTENSION 2854 PR PRESS OPTION 6**

**Section 1 Applicant**

\*\*\*\*\*USE ONLY BLUE INK\*\*\*\*\*

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Aliases \_\_\_\_\_

DOB \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Eye Color \_\_\_\_\_ Hair Color \_\_\_\_\_ Gender \_\_\_\_\_

Race \_\_\_\_\_ State of Birth \_\_\_\_\_ Country of Birth  U.S.  Other \_\_\_\_\_

Permanent Resident Card # A- \_\_\_\_\_ Naturalization # \_\_\_\_\_ Other # \_\_\_\_\_  Born Abroad

Driver License # \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_

Home Address \_\_\_\_\_ Apt # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ E-Mail \_\_\_\_\_

**Job Title/Position** \_\_\_\_\_

*By my signature below, I am acknowledging that all the information I have provided above is true and correct and that any falsifications whether erroneously or not may constitute an arrestable offense. I will immediately notify the Access Control Office if I am arrested for any crime regardless if I am convicted or not. I also understand that if my badge is lost or stolen it is my responsibility to notify the Airport immediately and shall adhere to all policies and procedures explained to me during SIDA training to include safeguarding my LRD issued ID media.*

**Employee Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Section 2 Employee Signatory / Sponsor**

Company Name \_\_\_\_\_

Physical Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Company Phone # (\_\_\_\_) \_\_\_\_\_ Fax # (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

**Requested Access Level(s)**  Grey All Areas  Red Sterile/Secure  Green Sterile Only  Blue AOA  Purple AOA/Secure  Other Black (MX CBP)

Does your employee need to escort others?  YES  NO Will your employee need driving privileges?  YES  NO

*By my signature below, I acknowledge that I am an Authorized Signatory for the company listed above, that a specific need exists for providing the applicant with unescorted access authority for the level requested, and that individual applicant acknowledges their responsibilities under 49 CFR 4540.105(a). In addition, I certify that the information above is true and accurate, that employer authorizes fingerprints to be obtained for the purpose of a CHRC where required for unescorted access. Airport Identification Badge will be returned immediately upon request, termination, or when access is no longer required.*

**Authorized Signature** \_\_\_\_\_ **Print** \_\_\_\_\_ **Date** \_\_\_\_\_

(ONLY PERSON(S) with signatory authorization on file can sign this form)

**Section 3 Office Use ONLY**

<b>Training</b>	<b>Check Off List</b>	<b>Contractor</b>
SIDA Class ____/____/____	<input type="checkbox"/> 1 <sup>st</sup> I.D. Presented	<input type="checkbox"/> 1 Year
	<input type="checkbox"/> 2 <sup>nd</sup> I.D. Presented	<input type="checkbox"/> ____ Months
<b>Fingerprints</b> Initial	<b>Fingerprints</b> Received	
____/____/____	____/____/____	
	ASC Approval	Date

## LRD ID MEDIA APPLICATION INFORMATION

### FEDERAL REGULATIONS:

In accordance with 49 CFR § 1542.209 and 1544.229, the airport operator will collect and process fingerprints for all persons requesting unescorted access to the Security Identification Display Area for the purpose of obtaining a criminal history record check (CHRC). A copy of the criminal record will be provided to the individual, if requested by the individual in writing. If the individual has questions regarding the results of the CHRC, please contact the Airport Security Coordinator, Capt. Javier De Hoyos, at (956) 785-1701.

### AUTHORIZATION FOR FINGERPRINT-BASED CRIMINAL HISTORY RECORDS CHECK

PLEASE READ AND REVIEW THE FOLLOWING LIST OF DISQUALIFYING CRIMINAL OFFENSES AS LISTED IN TRANSPORTATION SECURITY REGULATION (TSR) 1542.209 (D).

Under 49 CFR §1542.209 (e) all persons applying for unescorted access to the Security Identification Display Area (SIDA) are required to be fingerprinted in order for a criminal history records check (CHRC) to be completed. No applicant may be granted unescorted access to the SIDA if the CHRC reveals a disqualifying criminal offense. An applicant has a disqualifying criminal offense if the applicant has been convicted, or found not guilty by reason of insanity, of any of the disqualifying crimes listed below in any jurisdiction during the 10 years before the date of this application or while the applicant has unescorted access authority:

1. Forgery of certificates, false marking of aircraft, and other aircraft registration violation; 49 U.S.C. 46306..
2. Interference with air navigation; 49 U.S.C. 46308.
3. Improper transportation of a hazardous material; 49 U.S.C. 46312.
4. Aircraft piracy; 49 U.S.C. 46502.
5. Interference with flight crew members or flight attendants; 49 U.S.C. 46504.
6. Commission of certain crimes aboard aircraft in flight; 49 U.S.C. 46506.
7. Carrying a weapon or explosive aboard aircraft; 49 U.S.C. 46505.
8. Conveying false information and threats; 49 U.S.C. 46507.
9. Aircraft piracy outside of the special aircraft jurisdiction of the United States; 49 U.S.C. 46502(b).
10. Lighting violations involving transporting controlled substances; 49 U.S.C. 46315.
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.
12. Destruction of an aircraft or aircraft facility; 18 U.S.C. 32.
13. Murder.
14. Assault with intent to murder.
15. Espionage.
16. Sedition.
17. Kidnapping or hostage taking.
18. Treason.
19. Rape or aggravated sexual abuse.
20. Unlawful possession, use, sale, distribution, or manufacture of an explosive or weapon.
21. Extortion.
22. Armed or felony unarmed robbery.
23. Distribution of, or intent to distribute, a controlled substance.
24. Felony arson.
25. Felony involving a threat.
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; (iv) 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.
27. Violence at international airports; 18 U.S.C. 37.
28. Conspiracy or attempt to commit any of the criminal acts listed in this paragraph.

By signing below, the applicant is stating that he/she does not have a disqualifying criminal offense.

Under 49 CFR 1542.209 (I) the applicant has a continuing obligation to disclose to the airport operator within 24 hours if he or she is convicted of a disqualifying criminal offense that occurs while he or she has unescorted access authority.

\_\_\_\_\_  
**PRINT NAME**

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**DATE**

**The Privacy Act of 1974**  
**5 U.S.C. 552a(e)(3)**

## **PRIVACY ACT NOTICE**

**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 implemented Recommendation of the 9/11 Commission Act of 2007, § 1520 (121 Stat, 444, Public Law 110-52, August 3, 2007); and Executive Order 9397, as amended.

**Purpose:** The Department of Homeland Security (DHS) will use the biographical 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 systems 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 transit your fingerprints for enrollment into US-VISIT Automated Biometrics Identification System (IDENT). If you provide your Social Security Number (SSN), DHS may provide your name and SSN to the Social Security Administration (SSA) to compare that information against SSA records to ensure the validity of the information.

**Routine Uses:** In addition to those disclosures generally permitted under 5 U.S.C. 522a(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 application or in accordance with the routine uses identified in the TSA system of records notice (SORN) DHS/TSA 002 his information may be shared 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 Transportation Security Threat Assessment System (T-STAS), DHS/TSA 002, Transportation Security Threat Assessment System. For as long as your fingerprints and associated information/biometrics 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 the FBI's Blanket Routine Uses.

“I authorize the Social Security Administration to release my Social Security Number and full name to the Transportation Security Administration, Office of Transportation Threat Assessment and Credentialing (TTAC), Attention: Aviation Programs (TSA-10)/ Aviation Worker Program, 601 South 12<sup>th</sup> Street, Arlington, VA 20598.

“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.”

**SOCIAL SECURITY NUMBER:**    --   --

**DATE OF BIRTH:**   /   /

**PRINT FULL NAME:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**OBTAINING AN AIRPORT ID/ACCESS CONTROL MEDIA IS A PRIVILEGE.**

The Airport ID / Access Control Media is the property of the Laredo International Airport and must be returned immediately upon request, damaged, lost and found or no longer valid. A replacement charge and/or penalty fee will be assessed for a lost or unreturned ID Media.

**CERTIFICATIONS:**

“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 of Title 18 of the United States Code.)”

\_\_\_\_\_  
**PRINT NAME**

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**DATE**

**APPLICANT MUST PRESENT REQUIRED FORMS OF ID.**

**EXPIRED DOCUMENTS ARE NOT ACCEPTABLE.**

## LISTS OF ACCEPTABLE DOCUMENTS

**All documents must be UNEXPIRED**

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

<b>LIST A</b> <b>Documents that Establish Both Identity and Employment Authorization</b>	<b>OR</b>	<b>LIST B</b> <b>Documents that Establish Identity</b>	<b>AND</b>	<b>LIST C</b> <b>Documents that Establish Employment Authorization</b>
<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 a nonimmigrant alien authorized to work for a specific employer because of his or her status:               <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 alien's nonimmigrant status 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>	OR	<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>	AND	<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 Birth Abroad issued by the Department of State (Form FS-545)</li> <li>3. Certification of Report of Birth issued by the Department of State (Form DS-1350)</li> <li>4. 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>5. Native American tribal document</li> <li>6. U.S. Citizen ID Card (Form I-197)</li> <li>7. Identification Card for Use of Resident Citizen in the United States (Form I-179)</li> <li>8. Employment authorization document issued by the Department of Homeland Security</li> </ol>

**Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274).**

**Refer to Section 2 of the instructions, titled "Employer or Authorized Representative Review and Verification," for more information about acceptable receipts.**