

### PSTS-09 WILL BE CONDUCTED AT THE SECRET LEVEL

This form has been revised to meet the guidelines set forth by the DoD 5220.22-M / National Industrial Security Program Operating Manual (NISPOM) Chapter 6, Section 2. All military, government, industry attendees, speakers, guests and JHU/APL employees must complete this security clearance certification by 22 October 2009.  
**No walk-ins will be permitted.**

#### PERSONAL DATA

(To be completed by applicant. Please type or print legibly)

Name \_\_\_\_\_

SSN \_\_\_\_\_

Citizenship \_\_\_\_\_

Date of Birth \_\_\_\_\_

Birthplace \_\_\_\_\_

If Naturalized Date & No. \_\_\_\_\_

Company/Org \_\_\_\_\_

Telephone \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

#### SECURITY CLEARANCE CERTIFICATION

Certification is made herewith that the above named person has a SECRET Security Clearance.

Security Clearance \_\_\_\_\_

Granted by \_\_\_\_\_

Date \_\_\_\_\_

*Title 18 United States Code 1001 makes it a criminal offense, punishable by a maximum of five (5) years of imprisonment, a \$10,000 fine, or both, knowingly and willfully to make a false statement or representation to any Department or Agency of the United States as to any matter within the jurisdiction of any Department or Agency of the United States. This includes any statement made herein which is knowingly incorrect, incomplete, or misleading in any important particular.*

#### CONTRACTOR EMPLOYEES ONLY (must check one) Justification for Attendance (Per NISPOM 6-203)

\_\_\_ Classified Contract # \_\_\_\_\_

\_\_\_ Classified Program # \_\_\_\_\_

\_\_\_ Other Official Basis (Describe:)  
\_\_\_\_\_  
\_\_\_\_\_

#### CERTIFICATION

Name of Security Officer \_\_\_\_\_

Signature of Security Officer  
\_\_\_\_\_

Date \_\_\_\_\_

Government Agency or Company Name  
\_\_\_\_\_

CAGE Code \_\_\_\_\_

Telephone \_\_\_\_\_

#### REQUIRED PROCESS FOR SUBMISSION:

1. This form must be completed as your certified visit request and justification for attendance. Fax to the JHU/APL Visitor Control Center (240) 228-6400.
2. Please note: No JPAS or other type of visit requests will be accepted for this event.

#### MAILING ADDRESS:

JHU/APL  
11100 Johns Hopkins Road  
Laurel, Maryland 20723-6099  
Attention: Visitor Control

QUESTIONS: (240) 228-5661

