



Section 1 - Applicant Information

PURPOSE OF APPLICATION <input type="checkbox"/> New <input type="checkbox"/> Renew <input type="checkbox"/> Change (add driving, title change, etc.) <input type="checkbox"/> Company Name Change or Department Name Change <input type="checkbox"/> Name Change (Supporting documents Required) <input type="checkbox"/> Replacement: Lost, Stolen or Destroyed (MUST complete Section 5)		
FIRST NAME (LEGAL)	MIDDLE NAME (LEGAL)	LAST NAME (LEGAL)
Other Legal Name Used (example maiden name):	Other Legal Name Used (example maiden name):	Other Legal Name Used (example maiden name):
DATE OF BIRTH (mm-dd-yyyy)	BIRTHPLACE City: _____ State: _____ Country: _____	Are you a Citizen of the United States of America? <input type="checkbox"/> Yes <input type="checkbox"/> No If you are not a U.S. CITIZEN, please list your country of Citizenship: _____
SOCIAL SECURITY NUMBER (###-##-####)	TELEPHONE NUMBERS Cell Phone: () - - Work Phone: () - -	
HOME ADDRESS Street: _____ Apt.#: _____ City: _____ State: _____ Zip: _____		
HEIGHT Feet: _____ Inches: _____	WEIGHT _____	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female
EYE COLOR <input type="checkbox"/> Black <input type="checkbox"/> Blue <input type="checkbox"/> Brown <input type="checkbox"/> Green <input type="checkbox"/> Hazel <input type="checkbox"/> Other	HAIR COLOR <input type="checkbox"/> Black <input type="checkbox"/> Blond <input type="checkbox"/> Brown <input type="checkbox"/> Red <input type="checkbox"/> Gray <input type="checkbox"/> White <input type="checkbox"/> Bald <input type="checkbox"/> Other	
RACE (Note: For finger printing purposes only) <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native American <input type="checkbox"/> Unknown <input type="checkbox"/> Caucasian/Latino	STATE DRIVERS LICENSE OR IDENTIFICATION CARD NUMBER _____ State: _____ EXP Date: (mm-dd-yyyy) _____	Security Use Only IDs
E-MAIL ADDRESS _____	Security Use Only Work Authorization w/Exp Date	

PLEASE BE ADVISED: The Department of Aviation, for the City and County of Denver ("City") may use the cell phone number provided in this form to notify you via text message of critical emergency and training information about DEN. Through the airport's emergency notification system, you may receive text messages regarding evacuation orders or notification of significant, life threatening emergencies via the cell phone number entered on this form. By signing this form, you are certifying that the cell phone information provided is true, accurate, current, and complete. The cell phone number you provide will only be used for official purposes. All Airport Identification Media holders may be auto enrolled in the emergency notification system on/or after June 1, 2018. To opt out of emergency notifications via text please enter STOP after you receive a text via the emergency notification system. Your cell phone carrier's standard data, text, and usage rates apply.

- When renewing, two (2) forms of identification are required. One must be a government-issued photo identification.
- If you are not a United States citizen, then you must **ALWAYS** provide proof of Work Authorization.

Section 2 - Company Information

Sections 1, 3, and 4 **MUST** be filled out and then validated by an "Authorized Signatory" prior to completing this section. Type or print legibly in ink, or the application will be rejected.

COMPANY NAME (Use approved acronyms only)	DEPARTMENT CODE (If applicable)	APPLICANT'S ACCESS LEVEL (Use approved acronyms only)
BADGE COLOR <input type="checkbox"/> Brown <input type="checkbox"/> Orange <input type="checkbox"/> Green <input type="checkbox"/> Purple - Demonstrated Business Need to Escort	SECURED AREA DRIVING (Green or Purple only) <input type="checkbox"/> Airfield/Tunnel Driving Privileges? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Limited Access Route (LAR) Endorsement? <input type="checkbox"/> Yes <input type="checkbox"/> No Movement Area Privileges (ONLY with Driver Trainer approval)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
AUTHORIZED SIGNATORY E-MAIL ADDRESS _____	Security Use Only	
AUTHORIZED SIGNATORY NAME _____ PHONE # () - -		
My signature below certifies that I have reviewed this application for accuracy, have certified that the applicant has a demonstrated need for the designated access level, and have approved Denver International Airport to Fingerprint and/or badge my employee and bill my company for the appropriate fees (if applicable). Authorized Signatory Signature: _____ Date: (mm-dd-yy) - - Do NOT Sign a Blank Application Valid for 30 days after signed and dated	Notes	
Note: Please write for all inquires and questions about Criminal History Record Check (CHRC) results to the following: 49CFR Part 1544 Employees - Notify Aircraft Operator who sponsored the applicant.		

NOTE: Authorized Signatory signature above indicates that Applicant has been given a copy of the Privacy Act Notice

Checking this box indicates the Authorized Signatory is requesting that the applicant be fingerprinted!

AIRCRAFT OPERATOR FINGERPRINTING & BADGING APPLICATION

Section 3 - Disqualifying Criminal Offenses Checklist

This section **MUST** be filled out by the Applicant listed in Section 1

All applicants for an Airport ID badge at DEN will receive the following:

Ten (10) year Criminal History Records Check (CHRC)

Review and mark the appropriate statement below if you have been convicted, given a deferred sentence, found not guilty by reason of insanity or have been arrested and are awaiting judicial proceedings of **ANY** of the criminal offenses listed below during the last ten (10) years. **All applicants must mark either YES or NO to the statement below.**

- YES,** I have been convicted, given a deferred sentence, found not guilty by reason of insanity or been arrested and awaiting judicial proceedings of **ANY** of the criminal offenses listed in Section 3 (Disqualifying Criminal Offenses Checklist) within the last ten (10) years.
- NO,** I have not been convicted, given a deferred sentence, found not guilty by reason of insanity or been arrested and awaiting judicial proceedings of **ANY** of the criminal offenses listed in Section 3 (Disqualifying Criminal Offenses Checklist) within the last ten (10) years.

Forgery of certificates, false marking of aircraft, and other aircraft registration violation; 49 U.S.C. 46306.
 Interference with air navigation; 49 U.S.C. 46308.
 Improper transportation of a hazardous material; 49 U.S.C. 46312.
 Aircraft piracy; 49 U.S.C. 46502.
 Interference with flight crew members or flight attendants; 49 U.S.C. 46504.
 Commission of certain crimes aboard aircraft in flight; 49 U.S.C. 46506.
 Carrying a weapon or explosive aboard aircraft; 49 U.S.C. 46507.
 Conveying false information and threats; 49 U.S.C. 46507.
 Aircraft piracy outside the special aircraft jurisdiction of the United States; 49 U.S.C. 46502(b).
 Lighting violations involving transporting controlled substances; 49 U.S.C. 46315.
 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.
 Destruction of an aircraft or aircraft facility; 18 U.S.C. 32.
 Murder.
 Assault with intent to murder.
 Espionage.
 Sedition.
 Kidnapping or hostage taking.
 Treason.

Rape or aggravated sexual abuse.
 Unlawful possession, use, sale, distribution, or manufacture of an explosive or weapon.
 Extortion.
 Armed or felony unarmed robbery.
 Distribution of, or intent to distribute, a controlled substance.
 Felony arson.
 Felony involving a threat.
 Felony involving willful destruction of property.
 Felony involving importation or manufacture of a controlled substance.
 Felony involving burglary.
 Felony involving theft.
 Felony involving dishonesty, fraud, or misrepresentation.
 Felony involving possession or distribution of stolen property.
 Felony involving aggravated assault.
 Felony involving bribery.
 Felony involving illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than 1 year.
 Violence at international airports; 18 U.S.C. 37.
 Conspiracy or attempt to commit any of the criminal acts listed in 49 CFR Part 1544.229(d).

Section 4 - Agreement Section

This section **MUST** be filled out by the Applicant listed in Section 1

I hereby agree to all of the applicable statements:

- The information I have provided on this application 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 on this application can be punished by fine or imprisonment or both. (See section 1001 of Title 18 United States Code.)
- In conjunction with the Federal regulations under 49 CFR Part 1544.229(l), and Part 20 of the Denver Municipal Airport System Rules & Regulations, I understand that I have a continuing obligation to disclose to Denver International Airport within twenty four (24) hours if I am arrested and awaiting judicial proceedings, convicted, or found not guilty by reason of insanity of any Disqualifying Criminal Offenses (Except Traffic Violations) that occur while I have unescorted access authority. I authorize the submission & any subsequent resubmission of my fingerprint templates to perform a CHRC at the City and County of Denver's discretion.
- Before receiving a Denver International Airport ID badge I will complete all security training concerning Airport Rules and Regulations and Transportation Security Regulations (49 CFR Part 1500 Series). At all times I will adhere to Denver Municipal Airport System Rules and Regulations, Part 20 (available at: <http://www.flydenver.com> or at Airport Security Badging Offices). I understand, acknowledge, and agree that violations of the Critical Violations "Big 6" (Section 20.04-16) may result in immediate revocation of my Airport ID badge and that I am personally responsible for all TSA imposed Civil Penalties incurred by myself.
- I understand that if accessing or controlling an access point (doors, gates, etc.), I must challenge and request Airport approved identification from all individuals who attempt to gain access to assure that they are authorized. When accessing or controlling an access, I shall not permit an individual to gain access unless the individual successfully uses their Airport ID badge.
- If my badge has Driver Authorization, I agree to abide by all Rules and Regulations for the operation of a vehicle within the Secured Area, and understand that failure to do so may result in revocation of my driving privileges. Airport personnel are not authorized to enter runways or taxiways unless they are escorted by, or it has been authorized by, Airport Operations.
- I understand that the City and County of Denver reserves the right to deny or revoke an Airport ID badge. (Denver Municipal Airport System Rules and Regulations Part 20)

Applicant's Full Legal Name (Printed): _____
 FIRST MIDDLE LAST

Applicant's Signature: _____ Date: (mm-dd-yy) ____ - ____ - ____

Section 5 - Declaration for Replacement Badge

My Denver International Airport ID badge was **lost, stolen, or destroyed**. Therefore, I am requesting through my employer to have a replacement of my Denver International Airport ID badge issued.

Applicant's Signature: _____ Date: (mm-dd-yy) ____ - ____ - ____