Fields in bold are required   # GETS/WPS Request Form   Date:

For POC: Enter this information online at http://gets.ncs.gov. For help: 866-NCS-CALL (627-2255) or 703-760-CALL.
For others: Use this form to collect user information and forward to POC.

Requesting: (select all that apply):   ☐ GETS Card   ☐ WPS Service

Organization: (Acronym) _____   Spell out Organization:_____

Suborganization: (Acronym) _____

Spell out Suborganization: _____

GETS NS/EP Mission Criteria: select one
WPS NS/EP Mission Criteria: select one
NS/EP User Type: **Sector:**

For WPS Requests Only

Service Provider: select one

WPS will be an additional cost on your cellular account and must be coordinated with your organization's cellular accounts manager prior to submitting this request.

Account #:   **WPS Phone #:**

Name:

_____ _____ __ _____ _____
(Prefix)   (First Name)   (MI)   **(Last Name)**   (Suffix)

Name to appear on card: _____

NS/EP Title or Function: _____   US Citizen: ☐ Yes ☐ No

Work Address:_____

_____

City:_____   **State:**_____   **ZIP:**_____   **Country:**_____

Methods to contact subscriber

Provide at least 1 phone number and at least 1 other means of contact (phone, e-mail, etc.).

Primary Phone #: _____   Secondary Phone #: _____

Cellular #: _____   After Hours #: _____

Pager #: _____   Pager PIN # (if applicable): _____

E-mail: _____   Fax # (POC/Alt POC only): _____

If you have a GETS card or were issued one from stockpile, provide 1st 8 digits: _____

International Calling (for GETS): ☐ Yes ☐ No   Continuity: ☐ Yes ☐ No