

# **United States Office of Personnel Management**



Completing the 2010 SF 86 in e-QIP

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## 1 Introduction

## 1.1 What is the SF 86?

This Quick Reference Guide is provided to assist you in completing the Questionnaire for National Security Positions Standard Form 86 (SF 86) using the Electronic Questionnaires for Investigations Processing (e-QIP) system. Please follow this guide step-by-step to ensure that your questionnaire is completed properly.

e-QIP is a web-based automated system that was designed to facilitate the processing of standard investigative forms used when conducting background investigations. e-QIP allows you to electronically enter, update, and transmit your personal investigative data over a secure internet connection to a requesting agency. The requesting agency will review and approve the investigative data.

## 1.2 Why am I being required to have a background investigation?

The U.S. Government conducts background investigations to determine if applicants or employees meet the suitability or fitness requirements for employment, or are eligible for access to Federal facilities, automated systems, or classified information. All persons must be properly investigated and adjudicated to be issued a credential in compliance with requirements and to be authorized access to classified information.

The scope and type of background investigation varies depending on the duties and access requirements for the position, as does the amount of time it takes to be completed. The employing or sponsoring agency is responsible for determining the appropriate level of investigation to be conducted based on current rules and procedures.

# 1.3 Is completing the form mandatory in order to get a position in the federal government?

Providing the information requested on the form is voluntary. However, if you do not provide the information requested, it may adversely affect your ability to gain a national security position or receive eligibility to access classified information as may be required for the position you are applying for.

Be completely honest and forthright when answering all questions on the SF 86. If necessary, provide clarification or explanation for how you answered a particular question in the Optional Comment section provided in e-QIP.

## 1.4 How much time do I have to complete the form?

Be as timely as possible in completing your investigation request. You should earnestly try to meet the deadline your agency has established for you to complete this form.

Public burden reporting for this collection of information is estimated to average 150 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

# 2 **Protecting Your Privacy**

## 2.1 What happens to all the personal information that I enter into e-QIP? Is it safe?

Security is of major concern whenever you're dealing with personal information. This concern has been addressed by specific Federal guidelines implemented to safeguard Personally Identifiable Information (PII). PII is defined as information that can be used to discern or trace a person's identity; and alone, or combined with other information, can be used to compromise the integrity of records relating to a person by permitting unauthorized access to or unauthorized disclosure of these records.

Several security measures have been built into e-QIP to help to minimize unauthorized access to your information:

- e-QIP uses layered security to stop hackers and limit access to personal data. Transport Layer Security (TLS) and its predecessor, Secure Socket Layer (SSL), are <u>cryptographic protocols</u> that provide <u>security</u> for communications over networks such as the <u>Internet</u>. TLS and SSL encrypt the segments of network connections at the <u>application layer</u> to ensure secure end-to-end transit at the <u>transport layer</u>. All internet-based data transmissions are encrypted using 128-bit encryption provided through common browser SSL technology.
- e-QIP requires that TLS 1.0 be enabled in the user's browser. Without this setting, users get a "Page Cannot be Displayed" error.
- To log in to e-QIP, each user must answer a series of unique questions, referred to as Golden Questions.
- Only persons with active investigation requests can log in to e-QIP.
- e-QIP has been tested through the National Institute of Standards and Technology (NIST) Certification and Accreditation process and is compliant with all requirements.

It is OPM policy to ensure that all information technology (IT) systems that collect, maintain, or disseminate information in an identifiable form have Federally mandated controls in place to protect and prevent the breach of PII. You can learn more about OPM's privacy policies at these websites:

- <u>http://www.opm.gov/privacy/links.asp</u>
- <u>http://www.opm.gov/privacy/pia.asp</u>
- http://www.opm.gov/privacy/PIAs/eQIP.pdf

# 3 Before You Begin

## 3.1 What do I need in order to complete the SF 86?

To complete your e-QIP investigation request form you will need access to a computer with an internet connection and a web browser. You should also gather the following information:

- Proof of citizenship, if applicable, such as: passport, Citizenship Certificate, Naturalization Certificate, or Alien Registration Number. You may be able to obtain assistance with lost or unknown information at: <u>http://www.uscis.gov/portal/site/uscis</u>
- Employment history
  - o Current and previous work location addresses
  - Supervisor names, addresses, and contact information
- Personal residence(s)
- Name, address, and phone number of a person who knew you at each address.
  - Note: All contact information must include a physical address. PO Boxes are unacceptable. APO/FPO is allowed. For assistance in locating address information refer to: <u>http://maps.google.com</u>
- Three personal references
- Relatives' citizenship information, aliases, employer, and foreign activities
- Selective Service ID number, if applicable. If you need your Service Number call 1-847-688-6888 or visit <u>http://www.sss.gov</u> to obtain it

Note that for most of the categories listed above, you'll need information going back ten years or to your 16<sup>th</sup> birthday, whichever is shorter. In most categories the instructions will state that you should not list information before your 18<sup>th</sup> birthday unless necessary to provide a minimum of two years history. Please follow the specific instructions for each question on the SF 86.

# 4 Configuring Your Browser

e-QIP is designed to be accessible from any computer, anywhere in the world. You can use your personal computer at home or at the office. e-QIP is compatible with most well-known browsers including Microsoft's Internet Explorer, Mozilla Firefox, and Apple Safari. The following procedures are provided as a guide for configuring your browser to work with e-QIP.

## 4.1 Configuring Internet Explorer

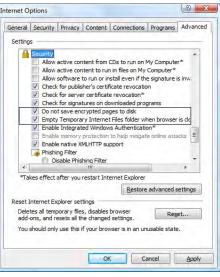
To use Microsoft Internet Explorer (IE) to access e-QIP, you must have version 6.0 or higher. To check your version, open Internet Explorer and select **Help > About Internet Explorer**. For the latest version and updates, visit <u>http://www.microsoft.com</u>.

**Note:** If you use AOL, make sure you open Internet Explorer in a new window outside of AOL.

## To set the Security options for IE:

- 1. Select **Tools** in the menu bar.
- 2. Select Internet Options.
- 3. Select the **Security** tab.
- 4. Select the **Custom Level...** button.
- 5. In the Settings list box, scroll down to the **Scripting** section.
- 6. Under Active Scripting, select the Enable radio button.
- 7. Click OK.
- 8. Select **Yes** on the confirmation dialog box.
- 9. Select the Advanced tab.
- 10. In the Settings list box, scroll down to the **Security** section.
- 11. Select the check box for each of the following options:
  - Do not save encrypted pages to disk
  - Empty temporary Internet Files Folder when browser is closed
- 12. Click **OK**.

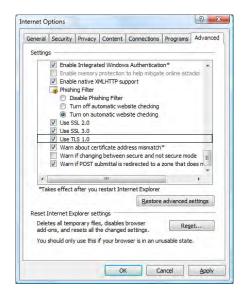
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TLS and SSL encrypt the segments of network connections. e-QIP requires that TLS 1.0 be enabled in your browser. If you do not enable this setting, you will get a "Page Cannot be Displayed" error.

#### To enable TLS 1.0 in IE:

- 1. Select Tools
- 2. Select Internet Options
- 3. Select Advanced Tab
- 4. Scroll down to the **Security** section
- 5. Select the Use TLS 1.0 checkbox
- 6. Click OK



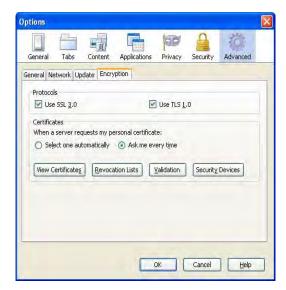
## 4.2 Configuring Mozilla Firefox

To use Mozilla Firefox with e-QIP, you must have version 1.0 or newer. You can find out which version of Firefox you have by selecting **Help > About Mozilla Firefox**. To get the latest version, visit <u>http://www.mozilla.com</u>.

Although security settings may be preset to default to appropriate settings, you should verify that they are configured as follows.

## **To configure Firefox:**

- 1. Select Tools
- 2. Select Options....
- 3. Select the Advanced icon
- 4. Select the Encryption tab
- 5. Under Protocols, select the check boxes for Use SSL 3.0 and Use TLS 1.0



- 6. Select the Privacy icon
- In the Firefox will drop-down list box, select Use custom settings for history
- 8. Make sure the following options are selected:
  - a. Accept cookies from sites
  - b. Clear history when Firefox closes
- 9. Make sure the following options are de-selected:
  - c. Remember search and form history
  - d. Remember what I have downloaded
- 10. Click OK

## 4.3 Configuring Apple – Safari

Use the following instructions to configure your Safari browser to access e-QIP:

## To configure Safari:

- 1. Select Edit in the menu bar
- 2. Select Preferences...
- 3. Click the Advanced icon
- 4. Select the Show Develop Menu in Menu Bar check box
- 5. Click Close



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- 6. Select **Develop** in the menu bar
- 7. Under **User Agent**, select an appropriate browser: Internet Explorer for PC or Firefox for Mac
- Type <u>http://www.opm.gov/e-QIP</u> into the address field to reconnect, if needed, to the e-QIP website

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## 4.4 Configuring JAWS Screen-Reading Software

Job Access with Speech (JAWS) is a vocal screen-reading software program that enables visually impaired users of e-QIP to complete their forms. It accomplishes this by providing the user with access to the information displayed on the screen via a text-to-speech system. This system converts normal language text into speech or by means of a Braille display and allows for comprehensive keyboard interaction with the computer.

To use the JAWS Screen-Reading Software with e-QIP, you must use Internet Explorer 6.0 or later and JAWS 10.0 or later. For more information, use the following resource: <u>http://www.freedomscientific.com/products/fs/jaws-product-page.asp</u>.

# 5 Getting Started

## 5.1 Access the e-QIP Login Screen

To begin completing the SF 86 in e-QIP, you must first access the e-QIP login screen.

# To access the e-QIP Applicant Login Screen:

 Open your internet browser and navigate to the following URL: <u>http://www.opm.gov/e-QIP/.</u>

The e-QIP Gateway Page will appear.

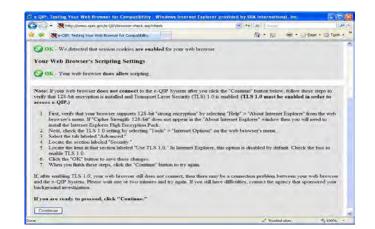
- Click the button labeled Enter e-QIP Applicant Site (or) click the e-QIP Applicant Site option in the left navigation bar.
- 3. e-QIP automatically tests your browser for compatibility and displays the results on a page entitled "Testing Your Web Browser for Compatibility."
  - If you have followed the steps included in this guide to configure your browser, you should show a green "OK" checkmark for each option.
  - If any options show a red warning, follow the on-screen instructions to change your browser settings. e-QIP will not display unless these settings are enabled.



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- 4. Click Continue.
- 5. If a Security Alert dialog box displays, click **Yes**.

**Note:** If an error message displays saying "Page Cannot Be Displayed," you have not enabled TLS 1.0. Go back to section 4.0 of this guide, Configuring Your Browser, for more information.



## 5.2 Log into e-QIP

Once you have accessed the e-QIP login screen, follow the steps below to log into e-QIP.

## To log into e-QIP:

- 1. Type your Social Security Number (SSN) into the **Social Security Number** field
- 2. Press the **[Tab]** key to move to the next SSN field
- 3. Click Submit



## 5.3 Answer the Golden Questions

If you entered your SSN correctly, you should next see a screen that asks you to answer three "Golden Questions." If this is your first time logging into e-QIP, the default Golden Questions display. These ask for your **last name**, **city of birth**, and **year of birth**. Once you answer these correctly, the system will prompt you to create three new Golden Questions and Answers.

If you have logged into e-QIP at some other time, your previously created personal Golden Questions will display.

**Note:** If questions other than the defaults are displayed, you have either entered your SSN incorrectly, not yet been initiated in e-QIP, or exceeded the timeframe for logging in after your request was initiated. Please try again. If you continue to experience an issue, you must contact your sponsoring agency for assistance.

#### To answer the Golden Questions:

- 1. Type the answer to each question in the **Answer** field
- To see the responses as you type, click the checkbox above the questions labeled Allow me to see my Golden Answers as I type them
- 3. Click Submit

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Enter the answer to each Golden Question.	
TAllow me to see my Golden Answers as I type them.	
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1 Answer:	
Question: In what CITY were you born? (DO NOT provide the State.) Answer:	
Question in what four-digit YEAR were you born?	
3 Anwer	
Note: If you entered your Social Security Number incorrectly, click "Heturn to Login Screen" to try again	n.

## 5.4 Create a New Set of Golden Questions (First Login Only)

The first time you log into e-QIP, the three default Golden Questions display. Once you answer these correctly, the system will prompt you to create a set of three new Golden Questions and Answers.

Golden Questions are one of several security measures that have been built into e-QIP to help minimize unauthorized access to your information. Golden Questions enable e-QIP to verify your identity. Create a combination of Golden Questions for which only you will know the correct answers. It is best to use a one word answer to minimize login error.

# To create a new set of Golden Questions:

- Select a set of questions that only you know the answers to. Keep in mind these guidelines:
  - Do not repeat any of the defaults
  - Questions can be phrases
  - Answers must have at least three characters
  - Capitalization does not matter; spelling and punctuation must match exactly
  - Each answer must be unique
  - You cannot leave a question or answer area blank

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**Remember!** It may be several years before you return to the e-QIP system to complete a reinvestigation, so it is recommended that you use responses that you will remember in the distant future.

 If you wish, click the checkbox above the questions labeled Allow me to see my Golden Answers as I type them to see the responses as you type

**Note:** Do not allow anyone to see your computer screen while your answers are on the screen.

- 3. Type each question into the **Question** field
- 4. Type the corresponding answer into each **Answer** field
- 5. Click Submit

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	WARNING
It is YOUR F	RESPONSIBILITY to provide Golden Questions to uniquely identify yourself.
If of the correct answers to, yo Rease take time to carefylly o	stona to help the e-QIP system venfy your identity. By creating a combination of Golden Questions that ONLY YOU can possibly in ou are assuing yourself that holdowy (including parents, apouses, and obser finited) can impersonate you in the e-QIP system. Another who element possibly including the entry of the Obser Question you emer VM evold by aggiest creating questions as in your life. PLEXEE RESULTER THAT IT MAY BE 4 OR 5 YEARS BEFORE YOU RETURN TO THE E-QIP SYSTEMINANE every immed in the Sature Toule.
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It is your responsibility to remember your Golden Questions. It is also important to protect the answers to your Golden Questions. These are your "password" to the e-QIP system.

**Note:** If you cannot remember the responses to your Golden Questions, or encounter any other issues with logging in, you must contact your sponsoring agency to have them reset your Golden Questions.

## 6 Completing the SF 86

After you have successfully logged into e-QIP by entering your SSN and answering the Golden Questions, you'll see the "Complete an Investigation Request" screen.

- Verify your personal data displayed at the top of the Select Investigation Request screen.
- 2. When you are ready to begin completing the form, click the link that says **Enter Your Data**.

**Note:** If you have been sponsored by multiple agencies within e-QIP at the same time, you may have multiple e-QIP request numbers here. Make sure that you select the correct link for the request you want to complete.

		GMB No. 3206-0
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	Last successful login: This is the first time you have logged into this system.	
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## 6.1 Reviewing the Form Completion Instructions

Prior to entering data for the first time, you *must* read the instructions on the "Form Completion Instructions" screen.

1. Confirm that you have read and understand the form completion instructions and disclaimer by clicking **Continue**.



 You will also be shown a disclaimer screen that provides additional instructions required by Executive Order 12968. You *must* indicate that you have read and understand the additional instructions by clicking the corresponding button in order to proceed.

You are now ready to complete your SF 86.



## 6.2 Tips for Completing the SF 86

- Read the entire form thoroughly and answer the questions truthfully.
- The form was designed to enable you to answer the minimum number of questions necessary for your specific situation. Your responses to a series of **Yes/No** questions will dictate whether you receive additional questions in a given area or advance to the next section.
- Use the **[Tab]** key to navigate through fields and complete the questions. **Do not use** the browser's **Forward** or **Back** buttons or the system will log you out as a security precaution.
- Click the **Reset this Screen** button at any time prior to clicking the **Save** button if you make a mistake and want to start over on a screen. This clears all of the information you entered on that page.
- Click **Save** or **Save/Continue** at the bottom of each page to move forward when you are finished and ready to proceed. Your information will be submitted and the next screen will appear. Continue until all information screens have been completed.
- You may also use the **Navigation** drop-down menu located at the top of the screen to go to any section of the form in any order. Select the section and click **Go**. Then navigate to the specific subsection desired.
- Click the "Add Optional Comment" button when it appears to provide additional comments if desired.
- You can review a copy of the form at any time by clicking the **Display** link in the upper left corner.

## 6.3 Avoiding Common Data Entry Errors

The latest electronic version of the SF 86 is designed to be intuitive and clear. Nevertheless, you may find the suggestions below helpful as you complete the form. These suggestions are based on some of the most frequently asked applicant questions. This guide does not cover every question within the SF 86, but highlights some of the commonly questioned items. They are organized by the corresponding section of the SF 86.

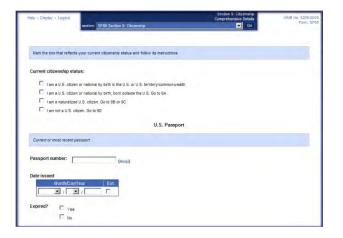
## 6.3.1 Section 4 – Social Security Number

 The SSN that you provide in Section four of the form must match the SSN that was used to initiate your request. If they do not match, you must contact your agency representative with the correct SSN. You will not be allowed to continue past Section 4 until the SSNs match.

elp - Diaplay - Logout	S	ections 1-4 - Identifying Information Detault OME No. 1	3205-000
	section: SF86 Sections 1-4 - Identifying Information	Go Go	orm SFI
rouide your full name	If you have only initials in your name, provide them and inc	ficate "Initial only". If you do not have a middle name, indica	10
No Middle Name'. If you	are a 'Jr.,' 'Sr.,' etc. enter this under Suffix.	acate minuaronity . Il you do not nave a middle name, indica	ie.
Nam	e IOINMN		
Last			
First:	· ·		
Middle:	No Middle Name 💉		
Suffec *	and the second se		
Same			
Month/DayA	'ear Est		
v / v			
rovide your place of bi	rth		
City:	County:		
State:	~		
Country:	~		
rovide your U.S. Social	Security Number		
E1			
Not Applicable			
Add Optional Comment			
Add Optional Comment			
	a.		

## 6.3.2 Section 9 - Citizenship

- Indicate your citizenship status.
- Indicate whether or not you possess a U.S. Passport.
- If Yes is selected, you will be asked to enter additional information about your U.S. passport.
- A link to the U.S. State Department website is provided in the event that you need assistance in completing this section.



## 6.3.3 Section 11 – Where You Have Lived

- List the places where you have lived beginning with your present residence and working backward 10 years. There can be no date gaps. Do not list residences before your 18th birthday unless to provide a minimum of 2 years residence history.
- The city, state, and zip code are required for all addresses.
- All contact information must include a physical address. PO Boxes are unacceptable. APO/FPO is allowed.
- If you provide an APO/FPO address, you will be asked to provide physical location data with street address, base, post, embassy, unit, and country location or home port/fleet headquarter.
- For locations outside of the U.S. and its territories, select the country in the "Country" dropdown list and leave the "State" field blank. It is not necessary to enter the United States as the country when the State location is inside the United States.

Help • Display • L	opput Deep Deals October 1999 Terr Deals October 1999 Terr Deals October
	question information acculut his place when you have lived.
actually living	that physical location of your residence. Do not use a Post Office Bon as an adorese, and do not list a permanent addrese when you were at a shortd addrese. We sure to be as specific as possible when listing an addrese location; for swample, do not list only your base or bernada number of home port
	ysical location in addition to your APO/PPO address is required for overseas sasignments.
Por addresse residence und	s in the last 3 years, if the address is "General Derivery," a Rural or State Route, or may be officult to locate, provide directions for locating the er Additional Comments below.
include aparte	vent numbers if applicable
1	
Reside	nce Information
Colorest C	
Dates of act Date	Month/Year Est.Pres.
From	
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	Military housing
	Coner (Explain)
e	
Explanation	
	Explanation
	2
Street addre	ssiAPO address/FPO address
Street	
Street City	
Street City	urby froutside the Limited States, otherwise, provide State and Zip Code

Below are some additional resources that you may find helpful in locating required address information:

- Address information http://maps.google.com
- Zip code lookup <u>http://zip4.usps.com/zip4/welcome.jsp</u>
- Area code lookup <u>http://www.nanpa.com/area\_code\_maps/ac\_map\_static.html</u>

### 6.3.4 Section 12 – Where You Went to School

• You must go back 10 years. If you did not receive a degree or diploma within this time period, list the last school you attended. There must be no date gaps.

	section: SF86	Section 12: Where You Went To Scho	bile	Go Go	Form SI
	-				
Provide the requ	ested information about this so	chool you attended. List college or univ	ersity degrees and the dates they were r	ecelved. For	
Correspondence	Distance/Extension/Online Sc	chool, provide the address where the n	Koords are maintained.		
the second second					
Dates of activi		Est/Pres			
From	Montry rear	est/Pres.			
To:	×.	~			
10.					
Select the most a	ppropriate type that describes	s your school.			
-					
School type:	High School				
	College/University/1/	Alitary College			
	Vocational/Technical				
		stance Extension Online School			
	Correspondende Dia	MandelEttension/Unline School			
Name of school	si				
Hume of some	n				
Street address	of rahaal				
Street	or school				
City:					
		otherwise, provide State and Zip Cod			
	til nutside the United States.		-		
	ry if outside the United States.	V Zip Code:			
Provide Count	ry if outside the United States.	Zip Code:			
Provide Count State:	ry if outside the United States	~			ns No
Provide Count State:		Long Contraction of Long			es No
Provide Count State: Country:		~			es No
Provide Count State: Country: Degree Idipioma n	conved?	Question			
Provide Count State: Country: Degree Idipioma n		Question			
Provide Count State: Country: Degreeklopiona n d"Yee," scientify t	icelved? ipe of degreeidiploma receive	Question			
Provide Count State: Country: Degree/diploma n If "Yes," scenth/ t Degree/diplom	ccelved? Ipe of degree/diploma receive 18	M Question ed and cate awarded.			
Provide Count State: Country: Degreeklopiona n d"Yee," scientify t	icelved? ipe of degreeidiploma receive	Question		awarded	
Provide Count State: Country: Degree/diploma n If "Yes," scenth/ t Degree/diplom	ccelved? Ipe of degreeklipioma receive 18	M Question ed and cate awarded.	Month/	awarded Year Est;	
Provide Count State: Country: Degree/diploma n rt "Yes," scentify t Degree/diplom	ccelved? Ipe of degreeklipioma receive 18	Auestion Question ed and cate awareed. Other degree		awarded Year Est;	

## 6.3.5 Section 13a – Employment Activities – Employment & Unemployment Record

- List all of your employment activities, including unemployment and selfemployment beginning with the present and working back 10 years. There must be no date gaps.
- Provide a verifier for any period of self-employment or unemployment. Also, explain any commuting distance discrepancies between employments and residences in the additional comments.



 All contact information must include a physical address. PO Boxes are unacceptable. APO/FPO is allowed. For address information refer to: <u>http://maps.google.com</u>.

If you worked for the same employer on more than one occasion at the same physical address, enter the most recent period of employment first, and then use the Add Additional

Employn

Work hours:

•

Provide Country if outside the United Bases, otherwise, provide State and Zip Code.  Bitet: Zip Code.  Country Zip Code.
Telephone Number Edension Telephone Number Edension Telephone Tele
Additional Periods of Activity with this Employer
Provide Additional Periods of Activity If you vorked for this employer on more than one occasion at the same physical location. After entering the most recent period of employment above, provide periods periods of employment at the same location in the additional fields provided below. For example, if you workes at XY Phymagin I bener, Go Juang 3 sesame services of them, you would enter casts and intermedian concerning the most encert period of employment first, and provide datas, position titles, and supervisors for the two previous periods of employment as entries below.
Additional periods of activity with this employer Nor Additable     Position table  Position table  Supervisor
1         Date         Morth/Year         Est.         Est.           1         Ports         W /          W           1         To         W /          W           Add A Bank Entry         Add A Bank Entry         Image: Comparison of the comparison of
Explanation/reason for leaving
Add Optional Comment
Save Cancel Delete Reset this Screen

Zip (

Period of Activity Button to add

the details of the other employment period(s).

•

## 6.3.6 Section 14 – Selective Service Record

- Males born after December 31, 1959, must list their Selective Service Number.
- If you do not know your Selective Service Number, call 1-847-688-6888 or visit <u>http://www.sss.gov</u> to obtain it.

	Comprehensive Section SFIBE Section 14 Selective Service Record	Go		Then 3
			-	
	Dueston		785	145
a. Are you a male bo	rn after December 31, 1959?		Г	Г
If you answered "Ves" to o	puestion a, answer the following question: if "No," go to Section 15.			
	Queston		Yes	No
b. Have you registered	with the Selective Service System (S\$\$)?		Г	E
atatus before signing this h	angen number selow. If "No," explain the reason for not registering selow. Peake consult to the	ne Corri d'you are unav	ware of y	SUF
atatus before signing this fi Registration number:	tration number selow. If "No," explain the reason for not regimeneng below. Peake consult to the	ли ССС й узы иле шлач	ware of y	sur
atatus before signing this fi Registration number:	tration number selow. If "No," explain the reason for not regimening below. Peake consult to	ne cosi a yeu ere inev	ware of y	SUF:
atatus before signing this fi Registration number:	tration number setsw. If YiQ," explain the reason for not registering below. Peake consult t	ne Corr e you are unev	ware of y	SUT
atatus before signing this fi Registration number:	tration number selow. If YiQ," explain the reason for not registering below. Peake consult t	ne Corr e you are unev	ware of y	SUT
atatus before signing this fi Registration number:	tration number selow. If "No," explain the reason for not registering below. Peake consult t	ine Coor is you are unav	ware of y	544°
autors before spoing the the	traten number setsw. If Yio," explain the reason for not registering below. Peake consult t	ne cost e yeu are unav	ware of y	SALT"
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antaux before spoing the fit Registration number: Explanation			ware of y	Skr.
autors before spoing the the			ware of y	Skr:

## 6.3.7 Section 16 – People Who Know You Well

- Provide three people who know you well and who preferably live in the U.S.
- People you include should be friends, peers, colleagues, college roommates, associates, etc., who are collectively aware of your activities outside of your workplace, school, or neighborhood, and whose combined association with you covers at least the last 10 years.
- Do not list your spouse, former spouse(s), other relatives, or anyone listed elsewhere on this form in this section.

Help • Display • Logout	Section 16: People Who Know You Well	OMB No. 3206-0005
	Entry Deta section: SF86 Section 16 People Who Know You Well	Enter CELC
		لکنے ا
Dates known		
Date Month		
From:		
Ta:		
Reference name:		
Relationship to you (C	heck all that apply	
Neighbor		
E Friend		
Work associate		
Schoolmate		
Cother (Explain)		
Coner (Explain)		
Explanation		
		-
		7
Include apartment number, It	applicable.	
Home or work address		
Street		
City:		
	the United States; otherwise, provide State and Zip Code.	
State:	Zip Code:	
Country:	<u>×</u>	
Teleshees		
Telephone Number	Extension Time	
Number		
I		
Check box if Interna	Ional or DSN phone number	
Alternate telephone		
Number	Extension	
Check box if interna	Ional or DSN phone number	
Add Optional Comment		
Save Cancel	Reset this Screen	

## 6.3.8 Section 17 – Marital Status

- You must select an option as to current marital status.
- If you are separated from your spouse, provide a separation date and your spouse's current or last known residence.
- You will be prompted to complete additional information based upon your situation.
- A cohabitant is a person with whom you share bonds of affection, obligation, or other commitment, as opposed to a person with whom you live with for reasons of convenience (e.g. a roommate). If applicable, complete the information requested about your cohabitant. If your cohabitant was born outside the U.S., provide citizenship information.

Mark one box to show your of Marital Status: Never married Married (Include Co	current marital status.			
Marital Status:	current marital status.			
Never married     Never married     Married (include Co     Separated				
<ul> <li>Married (include Co</li> <li>Separated</li> </ul>				
<ul> <li>Married (include Co</li> <li>Separated</li> </ul>				
Separated	ommon Law)			
Annulled				
Divorced				
Uldowed				
Item 17A. Curre	nt Spouse			
If applicable, complete the	following about your current spou	se only.		
Current Spouse				
Not Applicable				
Detail Information				
Add an Entry				
Item 17B. Forme	er Spouse(s)			
Complete the following abo	ut your former spouse(s).			
Former \$pouse(s)				
Not Applicable				
=		Detail information		
		Add an Entry		
		1000 011 0102		
Item 17C. Cohat	pitant			
(A cohabitant is a person w	Ith whom you share bonds of affe	ction, obligation, or other commitment, a	s opposed to a person with whom you live for	
reasons of convenience (a	roommate)). If applicable, comple	te the following about your cohabitant.		
Cohabitant				
Not Applicable				
#		Detail Information		
		Add an Entry		
Add Optional Comment				
Save Reset this	Screen			

• The Place of Birth field for the spouse, former spouse, and cohabitant will require a country of birth even if a state has already been provided.

- Display - Log	peist			Section 17: Marital Status Current Spouse	CANTER No. 1200
	waters.	SF05 Section 17: Marital Status			Fare
f you have only in	tais n your name	enter them and select initial Only (IO	) if you have no middle name	e, select No Middle Name (NMM) 1	fyou are a "Jr."
Sr.," etc. enter th	in under Suffix				
il name					
	Name	10/14/04			
Lest					
First		-			
Mode.					
Sutta-	*				
te of birth					
	n Dawlear	Est			
		1.17			
-					
ace of birth	_				
City			1		
Provide Country		ted States: otherwise, provide State			
		*	-		
State Country					

## 6.3.9 Section 18 – Relatives

- Select each type of relative applicable to you, regardless if they are living or deceased.
- An opportunity will be provided to list multiple relatives for each type, if necessary.

- Enter the details for each relative. Provide address information, place of birth including state and country of birth, citizenship, contact information, employer information, and any contact with foreign government or military personnel.
- The Place of Birth field will require a country of birth even if a state has already been provided.

Give the	e full name and other requested information, if applicable, for each of your relatives, living or deceased, specified below.
	Mother
2. 3.	Father Stepmother
3. 4.	Stepfather
5	Foster parent
6.	Child (include adopted and foster) Stepchild
8.	Steponio Brother
	Sister
10.	Stephrother Stepsister
12.	Half-brother
13.	Half-sister
14.	Father-In-Jaw Mother-In-Jaw
16.	Guardian
Summa	ry of Relatives
#	Detail Information
	Add an Entry
Add Op	tional Comment
Enur	Provide their Surgery
Save	Reset this Screen
	Section 18 Relatives
tep - Dia	ray + Logott Entry Petala DALID R5 Store
	section: SF86 Section 18: Relatives 🖉 Go
a.c.	
Relation	ship type
1	2
If you fee	I name or middle name is used, select No First Name (NFN) or No Middle Name (NUN), as appropriate if only an initial is used as the first name or
middle r	it name or middle name is used, select No First Name (NFN) or No Middle Name (NVN), as appropriate. If only an initial is used as the first name or ame, enter the initial (without the period) and select Initial Only (IO). If this person is a "Jr., "So." etc., enter this under Suffix.
Full nam	c .
1	Name ION/FINNIN
5	120
.F)	rst 🖉
104	die:
Sul	for the second se
Decease	od: 🗆 Yes
	T No
Date of	inni
-	Month/Day/Year Est
1	
Place of	birth
	ORY:
Der	be Country if outside the United States; otherwise, provide State
PTOVI	
	Country.
_	
Current	
_	addruss

· Zip Code

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### 6.3.10 Section 19 – Foreign Contacts

- A foreign national is defined as any person who is not a citizen or national of the U.S.
- You must indicate whether you have or have had close and/or continuing contact with a foreign national within the last seven years with whom you, or your spouse, or cohabitant are bound by affection, influence, common interests, and/or obligation.
  - If you have, you will be prompted to provide additional information.
  - Include associates as well as relatives not previously listed in Section 18 (Relatives).

#### 6.3.11 Section 20a – Foreign Activities

- You must indicate whether you, your spouse, your cohabitant, or any of your dependent children have EVER had any foreign financial interests such as stocks, property, bank accounts, businesses or investments.
- Exclude financial interests in companies or diversified mutual funds that are publicly traded on a U.S. exchange.
- If you answer "Yes," you will be prompted to provide additional information.

section	and the second se	Cillio I	10 9205
	n: SF86 Section 19: Foreign Contacts		Form
	Question	Yes	No
your cohabitant are bound by affect	e and/or continuing contact with foreign halfonals within the last 7 years with whom you, your spouse, or cton, influence, and/or obligation? Include associates, as well as relatives, not already lasted in Section 18. y person who is not a citizen or national of the U.S.).		
Summary of Foreign Contacts	Detail Information		_
<b>*</b> 1	Add an Entry		

Item 20A: Foreign Financial Interests		
Include stocks, personal property, company shares, investments, or ownership of corporate entities. Exclude U.Scased fund managers and accounts managed through your employer.		
# Question	Yes	No
<ol> <li>Do you have or have you EVER had any foreign financial businesses, foreign bank accounts, or other foreign financial interests of which you have direct control or direct ownership?</li> </ol>		
If you answered "Yes" to question 1, provide the type and amount of funds for each interest.		
Direct Foreign Financial interests		
Type of financial interest     U.S.     oolars		
1. Add A Blank Entry		
# Question	Yes	NO
2. Do you have or have you had any foreign financial interests that someone controls on your behalf?		
If you answered Yes' to question 2, provide an entry for each interest. Exclude U.Sbased fund managers and accounts managed through your empto	ver.	
Type of financial interest     Name of party who controls it     U.S.		
dollars		
Add A Blank Entry		
# Question	Yes	No
<ol><li>Do you own or have you owned real estate in a foreign country?</li></ol>		
If you answered "Yes" to question 3, provide an entry for each foreign real estate holding.		
Summary of Foreign Real Estate Holdings		
# Detail Information		
Add an Entry		
# Question	Yes	NO
4. Do you receive or have you received any educational, medical, retirement, social welfare, or other such benefits from a foreign country?		
If you answered "Yes" to question 4, provide an entry for each educational, medical, retirement, social weifere, or other such benefits from a foreign country.		
Foreign Benefits Estimated		
Type of benefit     Uallac In     US     Collars     C.     Add A Blanc Entry		
Add Optional Comment		
Save Reset this Screen		

# 6.3.12 Section 20b – Foreign Business, Professional Activities, and Foreign Government Contacts

- Indicate whether you have provided any support or advice to an individual associated with a foreign business or organization (not listed as a previous employer) within the last seven years.
- If you answer "Yes," you will be prompted to provide additional information.

sectors SP28 Section 205 Princips	Sector Surmery		Ser. 5
A COMPANY OF A DESCRIPTION OF A	Constion	Ves	No
<ol> <li>In the task 7 years, have you provided advice or support to anyone you have not previously lated as a former amphater regarding any</li> </ol>	associated with a foreign business or other foreign organization that of the following, management, strategy, thanong, or technology?	E.	-
Vas activity on official U.S. Government business	E Yes		
	FT 140		
If you answered "Yes" to question 1 ANO the activity was outside of provided.	official U.S. Government business, provide entries to describe the advice support		
ummary of Advice/Support Activities			-
	Detail Information		
	Add an Entry		
	Constant	Yes	No
in the last 7 years, have you attended any international conference	s, trade shows, seminars, or other meetings outside of the U.S.?	D	
Vas activity on official U.S. Government business?	E yes		
f you answered "rea" to question 2 AND the activity was outside of	C No		
	official U.S. Golemment business, provide an entry for each event.		
	effetar U.S. Gewanners business, provide an artir, for each even. Bys 13 Antoines Loo Ania an Entry		
lummary of Meetings	ontour u. 4. Convernment business, prodos ar sitry for each even. Desta I fotomination Add an Excep	Ves E	No
Community of Meetings	ontour u. 4. Convernment business, prodos ar sitry for each even. Desta I fotomination Add an Excep		A REAL PROPERTY AND
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ummuny of Meetings In the last 7 years reading of any of your investigation para memory, gi any branch growthing these a support Was activity on official U.S. Government business? Type extends "Yea" to question 3 AVXD To activity loss publics of	anticas Lu & Convertinent business, provide an anticip for each event.		A REAL PROPERTY AND
<ol> <li>n the list? years, they you or any of your immediate them, men membrane, is any theory governmen theor an argument was activity on official U.S. Government burstness?</li> <li>Type entered? "Yea" to question 3 AND the activity has publick of the entered?</li> </ol>	entrole V & Convertment business, provide an sitty, for each even.		A REAL PROPERTY AND
tommany of Meetings	Adde an index business, provide an antity for each event.      Adde an index      Constant      Constant      Constant      Vest      Vest      Vest      Vest      Constant      Development      Developmen		A REAL PROPERTY AND
tommany of Meetings	entrole V & Convertment business, provide an sitty, for each even.		A REAL PROPERTY AND
International Meetings      The Net 7 years, the you of any of your incredues their meetings     The Net 7 years, the you of any of your incredues their meetings, or any of your incredues a species.      The Net 7 years, the your of Net 11 and a species of the Net 11 and a spe			A REAL PROPERTY AND
tummury of Meetings	etical U.S. Government business, provide an sitty for each even.	E	P

#### 6.3.13 Section 21 – Mental and Emotional Health

- Indicate whether or not you have consulted with a mental health professional in the last 7 years, per the instructions provided on the screen.
- If you answer Yes, you will be prompted to provide the name, address, and phone of the doctor and facility with dates seen.

	ling in and of itself is not a reason to revoke or deny a clearance.		
	Question	Yes	No
in the last 7 years, have y hospitalized for such a co	rou consuïted with a health care professional regarding an emotional or mental health condition or were you indition?		
Answer "No" if the couns	leing was for any of the following reasons and was not court-ordered:		
If you answered "Yes,"	adjustments from service in a military combat environment.	tion for Rele	8038
of Medical Information F	ursuant to the Health Insurance Portability and Accountability Act (HIPAA).		_
	ursuant to the Health Insurance Portability and Accountability Act (HIPAA)		
of Medical Information F Summary of Treatmen	ursuant to the Health Insurance Portability and Accountability Act (HIPAA)		

## 6.3.14 Section 26 – Financial Record

- Indicate whether or not you have filed a petition under any chapter of the bankruptcy code within the last seven years.
- You must also indicate whether you have encountered any other financial issues within the past seven years.



- You will be prompted to complete additional required sections based upon your responses.
- When prompted, provide information for the timeframe mentioned in each specific question.
- List all debts past-due, if applicable. Include reasons for the past due status, amounts owed, and whether or not you have satisfied the issue. If you are working on the issue with a creditor, please explain when the debt will be paid.

#### 6.4 Handling Error Messages and Warning

In order to ensure the completeness of your data, a validation routine runs each time you click **Save** or **Save/Continue**. The validation routine will point out any Errors or Warnings and provide detailed instructions on how to satisfy each missing item. You will only receive validation messages if you have not answered a question appropriately.

*For example:* The required input for a telephone number is 10 numeric digits. If you enter anything less or greater than 10 digits, or entered a non-numeric character, the validation will reject your data and show an error at the top of the screen explaining the issue and prompting you to make a correction.

- For validation "Error" messages, please follow the instructions that the Error message provides you on the screen.
- You may correct your data by scrolling to the appropriate field and making your corrections.
- Click the Save button at the bottom of the page to save your changes.
- Error messages must be corrected before final validation and certification occurs.
- For validation "Warning" messages, you should provide the requested information.
- In some cases you may check the box "I do not know this information," if applicable. If so, an additional explanation is required if the check box is used.
- After choosing an action, click the Save button to save your changes.
- Warning messages must be corrected before final validation and certification occurs.
- When you reach the Validate, Review and Certify section towards the end of the SF 86, a list of Errors and Warnings may appear here if any issues were not corrected.
- When the validation results show no more Errors or Warnings, click **Continue**.



Help - Display - Logout		Valdato, Review, and Centry Valdate Your Data	. UNIB No. 3208-010
	section Validate, Review, and Centify	<b>9</b> 00	
Below are the results of va	lidating your data.		
Validation found no errors or	unsatisfied warmings. You may continue to the next	1854	
Valdation found no errors or	unsatisfied warnings. You may continue to the next	11634	
Continue			

## 6.5 Validating, Reviewing, and Certifying the SF 86

When you are satisfied that your form is complete and no validation errors are present, you have the option of reviewing a display copy of your form before certifying it. You can also review the Display copy at any time as you complete the form.

## To review the form before certifying:

- Click **Display** in the upper left corner of the next screen to view the document. An html document will open in a separate browser window. When you have finished reviewing the form, close the window.
- You may navigate back to previous sections of the form at this time if you need to make any changes.
- 3. If you do not have any changes, click **Continue**.
- Again, if you do not have any changes to the information you previously provided, click Certify Investigation Request button to complete your form.

**Important!** Once you certify the form, your answers will be locked and the form will become unavailable for editing. You will be unable to make any further changes.

- 5. A pop-up dialog box displays informing you that the process will take 20-30 seconds.
- 6. Click OK.

**Note:** Do not click the Certify Investigation Request button more than once.

Follow the instructions provided carefully on the next few e-QIP screens in the order that they are provided. Once you certify your form, there are a few additional steps before you can release the information to your sponsoring agency.

Help - Display - Logout		Validate, Review, and Certify Validate Your Data	OME No. 3205-0005
sector	n: Validate, Review, and Certify	Go	
Below are the results of validation	g your data.		
Leow are the results of variability	9 Yuuri udidi.		
Validation found no errors or unsate	sfied warnings. You may continue to the next task.		
	enco maninge. Foo may concide to bio next table		
Continue			



## 6.6 Completing the Signature Release Forms

The final release of your request is completed in several steps.

- Print or save an Archival Copy of the entire form
- Print the signature forms that you will sign and send to your sponsoring agency
- Add attachments
- Release and transmit the investigation request to the requesting agency

## 6.6.1 Step One: Instruction for Signature Pages, Attachments, and Archival Copy

Review the instructions for printing the signature pages, attaching files and printing a copy for your records.



#### 6.6.2 Step Two: Archival Copy

Print and/or save an electronic copy of the information you provided on the SF 86 for your records. If you do not have printer access, logout of e-QIP and go to a computer with printer access. Then log back into e-QIP to print the forms.

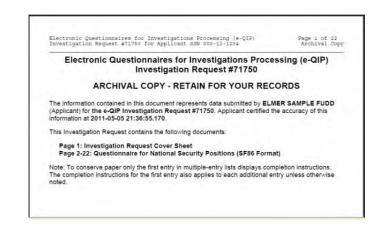
To save an electronic .pdf version of this Archival Copy, you may right-click on the link shown "Display the Archival Copy of the Investigation Request for Printing" and follow the steps to save the document in an appropriate location.

 To print, click Display the Archival Copy of this Investigative Request for Printing. The archival copy will open in Adobe Reader.

**Note:** The archival copy and signature pages display as PDF files. You must have the free Adobe Reader to view them. You can download Adobe Reader from http://www.adobe.com/products/a crobat/readstep2.html



- 2. In the Adobe Reader software, click the **print icon**.
- Close the Acrobat Reader window by clicking the X button in the upper right corner.
- 4. You may also save an electronic copy of this .pdf file for your records.
- 5. You must print and/or save the Archival Copy at this point, as you will not be able to access it at a later time once you release the form.



## 6.6.3 Step Three: Signature Forms

Signature Forms are a required part of an investigation as they authorize your Investigation Service Provider (ISP) to obtain necessary information. These are the forms you must sign and then send to your sponsoring agency by fax, mail or uploading via e-QIP. You must follow instructions provided to you by your sponsoring agency as to which option to choose to transmit these signature forms to them.

**Note:** The Fair Credit Report is a release form that must be submitted with all SF 86 forms to allow requests for credit checks and other financial data.

- Click the Signature Forms link displayed under Step Two Signature Forms for Printing.
- 2. This will open the signature pages in a separate window.
- If you do not have printer access, logout of e-QIP and go to a computer with printer access. Then log back into e-QIP to print the forms.

- Return To Menu - Logout						OME No	3206
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Click the appropriate link below the form to the office requesti						on the following screen, or subr ts have been submitted.	nt
Signature Forms	for Printing						
These forms are to be utilized	when the signature	will be applied in a	manual" or "wet	signature" manor	er.		
<ul> <li>Signature Forms</li> </ul>							
Back. Next							

- 4. In the Adobe Reader software, click the print icon.
- 5. Sign and date the release forms and certification statement:
  - a. Use black ink
  - b. Sign your name exactly as it appears in e-QIP (e.g., "John David Smith")
  - c. Sign and date inside the signature box
  - d. Any corrections or overwrites must be completed using a new signature form or by drawing a single line through the error and initialing the correction
- 6. Close the Acrobat Reader window by clicking the X button in the upper right corner.

## 6.6.4 Step Four: Upload or Fax Attachments

The attachments are the Signature Forms and any other information, such as a resume, that you would like to provide your sponsoring agency as a part of your investigation. Because there are multiple options, you must follow instructions provided to you by your sponsoring agency as to which option to choose to submit these attachments to them.

**Note:** Contact your sponsoring agency if you have any questions or need fax numbers or mailing addresses.

e-QIP has multiple attachment options. You could:

- Fax attachments to e-QIP directly by printing a bar-coded cover sheet for each item and then faxing to the number listed on the cover sheet.
- Upload documents you have scanned or saved to your computer directly.
- Fax documents to the sponsoring agency's fax machine, if they provided you a number.
- Send documents through regular mail to the address your sponsoring agency provided you.
- Select Yes or No to indicate if you want to work with attachments
- 2. Click Next

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		Step 4 of	5: Attachments	Summary			
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## One option is to upload a file:

- 1. Select Upload File
- 2. Click Next

- 3. Click Choose File
- 4. Select the file you want to upload
- 5. Ensure the file shows up in the attachment block and type a description in the **Description** field
- 6. Click Upload Attachment
- 7. Repeat to add other attachments

# Another option is to fax attachments directly to e-QIP:

- 1. Select Direct Fax
- 2. Click Next
- In the Fax Attachments to e-QIP Directly section, enter the number of pages for your document. Do not include the fax cover sheet in your number
- Each separate Signature Form or other document you are attaching must be itemized separately and each has its own fax cover sheet
- 5. Type your phone number into the **Sender's Contact #** field
- 6. Click Create Fax Cover Sheet

	Step 4 of 5: Add Allachmen	4 Upload File to e-QIP Directly	
	- E E	e 9	
Upload File			
Select the attachment by prowa of the file in the appropriate "De	ing for a file on your local system through scription" field. Finally, upload the file into	the use of the "Upload File" buttor. Once a file the system by clicking the "Upload Attachment"	is selected, type a description button
Uploaded file Specification			
		Network Graphica ( prig), or Portacle Documen ecification include a resolution of 300 dpi and b	
	Lipknett Par	to a DP Directly	
	elease and Medical Release forms must b aded as multi-page documents	te attached separately as single page documen	ts, tems such as a Help
Uploaded Attachment (	TEF, PDF, or PNO files only)	Drowse	
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Specify method to be used to provid	le vour attachmen	12			Upload File	Direct Fax	Expected

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Direct Fax		
1. Create Cover St	heet for Fax Attachment	
the fax cover si	de the number of "Attached Pages" (excluding cover sheet), and enter a contact to heet by clicking the "Create Fax Cover Sheet" button. Once generated, the fax cover iew and printing. The cover sheet (with barcode) must then be printed as black and v	sheet will appear in a separate new
2. Fax the docume	ent to e-QIP:	
	the cover sheet on top of the corresponding document cover sheet and document to the fax number listed on the cover sheet	
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This will create a fax cover sheet that will include your Request Number, Contact information, and a Barcode which will route the attachment to the correct Request in e-QIP.

**Note:** The fax cover sheet is active for only seven days. You will not be able to fax that cover sheet after that date has expired.

- 7. Print the fax cover sheet
- 8. Fax the cover sheet and the indicated document to the number provided on the cover sheet
- 9. Again, each separate item must have its own fax cover sheet

If the attachment is faxed successfully, it will appear in the Attachments Summary.



- 1. Select Expected
- 2. Click Next

	Request ID: 71750 Applicant Name: FUDD, ELMER	SAMPLE	
	Attachment Type: (APF	)	
c	Attached Pages (Excluding Cove Sender Contact #: 555-111 over Sheet is Invalid After: May 12, 2	-1234 011 at 16:12 EDT	
Instructions:			
1. Print this cover she	eet. The barcode (below) must print as a black a	nd white Image.	
	top of the corresponding document.		
	nd document to (555) 555-0101. ax will be attached to the Request ID specified a	the top of this page	
5. If the faxed attaching	nent does not show up within ten minutes in the	"Directly Attached" list and you	r fax machine
indicates that the t	ax was successfully sent, contact the agency the	t initiated your investigation R	equest.
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OFFICIAL USE ONLY

- 3. Provide a description for your attachment
- 4. Indicate how many pages it is
- 5. Select a method of transmission
- 6. Click Add Expected Attachment

						Oxia No 3206-0
	Step 4 of 5; A	dd Attachment -	Expected - Standard	Pax, Mail, or Other		
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## 6.6.5 Step Five: Release and Transmit the SF 86 Form

**Important!** You will not be able to access your investigation forms after you click "Release Request/Transmit to Agency." Be sure you have printed and/or attached all required forms, including signature forms, before clicking "Release Request/Transmit to Agency.

1. Click Release Request/Transmit to Agency

If the confirmation screen appears, you are
logged out of e-QIP and your information
has been transmitted to your sponsoring
agency

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Back	Release R	quest/Transn	ut to Agency				
Help							OMB No. 3205
					nine portion of your a requesting your inv		nave not electronically attached
For your privacy, clos		inen jos ina					

Congratulations! You have completed and submitted your investigation request.

If you have any questions about your investigation status, please follow up directly with your contact at your sponsoring agency.

## 7 What happens next?

Your sponsoring agency will carefully review your submitted SF 86. In the event that your information or attachments are incomplete, the sponsoring agency may return the information you provided in e-QIP and contact you to make corrections to the form.

In the event you are contacted to make corrections to your form, you will need to:

- Log into e-QIP
- Review the details of the request and make corrections via the e-QIP system
- Re-certify and print a new archival copy of the form
- Print, sign and attach new signature pages
- Re-release your form to the agency

Once the investigation has been scheduled, you may be contacted by an investigator to schedule your personal interview, if required. For the interview, you will be required to provide photo identification, such as a valid state driver's license. You may be required to provide other documents to verify your identity, as instructed by your investigator.



# UNITED STATES OFFICE OF PERSONNEL MANAGEMENT

Federal Investigative Services – Agency Training & Oversight 1900 E. Street, NW Washington, DC 20415