



Military Acceptance Facility Annual Certification Packet Instructions

This packet is used for two purposes: (1) the Annual Certification for existing Acceptance Facilities and (2) the nomination process for new Acceptance Facilities under the Department of State Passport Application Acceptance Program. Existing facilities are required to complete an Annual Certification packet each year and also update facility and agent information as needed throughout the year. Any existing Acceptance Facility that does not submit a completed packet by **October 31, 2015** will be suspended from the Program and cannot accept passport applications or offer other passport services until further notice.

Submission Instructions

1. **Complete** all pages of this packet and keep the **original** in a permanent file at the facility.
2. **Submit** an electronic copy of all pages via email to both the Special Issuance Agency's Customer Service Office at CA-PPT-SIA-AnnualCertification@state.gov and Logistics Services Washington at usarmy.belvoir.hqda-oaa-dol-w.mbx.paaf@mail.mil by no later than **October 31, 2015**.

Things to Remember When Completing the Packet

- The information provided in the packet must be complete and accurate, and the information provided must be legible and typed or written in black ink.
- Signatures and initials must be present where requested, even when submitting electronically. Digital signatures will not be accepted for Acceptance Agent signature fields.

Facility Information (Page 1)

Annual Certification: This box should be checked by existing Acceptance Facilities to indicate the packet is being submitted as required for the annual certification of the facility.

Nomination: Only check this box if submitting as part of a nomination request to set up a new Acceptance Facility. Such requests must be submitted to Logistics Services Washington (LSW) along with a justification memo providing supporting details for the request as well as any other information requested for consideration by the Special Issuance Agency (SIA). Please note that passport agent training will only be granted if this nomination request is approved by SIA. If approved, a Facility ID Number will not be issued until at least one nominated agent has successfully completed passport agent training.

Address Section: The facility's physical street address where agents are located must be listed on the form. If the facility has a separate mailing address, please provide the complete address that should be used to return completed passports to the facility via UPS, FedEx, or DHL.

Head of Facility Section: The person listed as Head of Facility should be a permanent or direct-hire employee of the Department of Defense who is designated by the installation to take on this role and who has the authority to grant approval for in-person site visits or inspections. The Head of Facility is responsible for all facets of the Program and must accept and distribute all materials (such as the FM PARG) and correspondence from SIA to all Acceptance Agents, including any correspondence sent from SIA to the Head of Facility's email address provided on Page 1.



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Number of Applications: In this field, please enter the number of applications your facility accepted in the past fiscal year (October 1, 2014 – September 30, 2015). If an exact figure is not available, please estimate as accurately as possible. For nominations, please leave this field blank.

Acceptance Agent Section: All current Acceptance Agents assigned to the facility must be listed in this section. Any agents who are listed as active in our records but are not included in this section of the packet will be deactivated effective the date the packet is signed by the Head of Facility. If more space is needed, please use an additional page to list any remaining agents assigned to the facility. The total number of agents listed in this section should match the number of copies of Page 4 (Acceptance Agent Eligibility) submitted with the Annual Certification packet.

Facility Eligibility (Page 2)

This section must be completed and initialed by the Head of Facility if the facility is a dual- or multi-function facility. A dual- or multi-function facility is defined as a single office or facility that can both accept passport applications and can create, print, amend, or accept applications for identity documents (such as driver's licenses and DoD ID cards). Facilities that do not have the capabilities listed above will mark 'No.'

If applicable, complete the Hand Carry Acknowledgment. The Head of Facility must sign and date Page 2. If you have any questions regarding this policy or facility eligibility, please contact SIA's Customer Service Office.

Head of Facility Eligibility (Page 3)

This page must be completed and signed by the Head of Facility designated on Page 1. All statements must be initialed certifying compliance with Program requirements.

Acceptance Agent Eligibility (Page 4)

This page must be completed separately and signed by **each** Acceptance Agent. Each agent must also attach a copy of his/her most recent training certificate that shows s/he successfully completed passport agent training within the past two years.

Only those Acceptance Agents who have completed and submitted Page 4, along with proof of training, with the Annual Certification packet will be permitted to accept passport applications.

For existing facilities, nominated agents who have not yet completed training should not be included under the Acceptance Agent section on Page 1 and should not submit Page 4. The Head of Facility must instead submit a completed "Acceptance Agent Add/Change/Remove" form to SIA's Customer Service Office.

For nomination packets only: Nominated agents should be listed under the Acceptance Agent section on Page 1. Each individual must complete Page 4 separately. The requested training date for each nominated agent should be listed in both sections for informational purposes, and all nominated agents must still complete the registration process through DoD's Passport Matters to request a specific training date.



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Check One: Annual Certification OR Nomination

I. Acceptance Facility Information

Facility Full Name: _____

Facility ID Number: _____ Branch of Service: _____

Facility Acronym: _____

Installation Full Name: _____

Unit/Installation's Size (Number of Personnel this Acceptance Facility Serves): _____

Street Address (No PO Box, APO, etc.): _____

City: _____ State/Country: _____ Zip/Country Code: _____

Mailing Address, if different (No PO Box, APO, etc.): _____

City: _____ State/Country: _____ Zip/Country Code: _____

Facility Phone Number (Commercial, No DSNs): _____

Facility Email Address: _____

Head of Facility Name: _____

Head of Facility Title: _____

Head of Facility Phone Number (Commercial, No DSNs): _____

Head of Facility Email Address: _____

Number of Passport Applications Accepted in Fiscal Year 2015 (Oct. 1-Sept. 30): _____

List of Passport Agents Assigned to Facility (New agents enrolled in training should be listed with their training date in place of the Agent ID Number. Use an additional page if needed. See page 4 for additional form to be completed by each agent listed below):

Acceptance Agent Full Name	Agent ID Number
1. _____	- _____
2. _____	- _____
3. _____	- _____
4. _____	- _____
5. _____	- _____
6. _____	- _____
7. _____	- _____
8. _____	- _____
9. _____	- _____
10. _____	- _____



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II. Acceptance Facility Eligibility

Facility ID Number: _____

Can this facility create, print, amend, or accept applications for Identity Documents (such as driver’s licenses or DoD ID cards)? Yes No

If you answered ‘Yes’ to the question above, the Head of Facility must initial all fields below certifying the facility is in compliance. Otherwise, the Head of Facility is only required to complete the Hand Carry Acknowledgement (if applicable), sign and date this page, and continue to Page 3.

Facility personnel do not have overlapping duties between passport acceptance functions and birth/identity document functions. This includes performing these duties on different days or hours. _____
Initial

Safety paper and/or blank cardstock is stored in a secure, locked container, and not accessible to Passport Application Acceptance Program personnel at any time. _____
Initial

If applicable, electronic transmittals and passport applicant information is in a separate electronic system and/or database from birth or identity document information. _____
Initial

The Federal and Military Passport Agent’s Reference Guide (FM PARG), and any other passport acceptance documents, information, and correspondence, is only accessible to trained, approved Passport Application Acceptance Program personnel. _____
Initial

Identity document printing, application acceptance, or record creation functions exist in a separate physical space from the Passport Application Acceptance Program. _____
Initial

Hand Carry Acknowledgement

Please initial this section if the facility executes hand carry applications (Please reference page 52 of the 2013 FM PARG for hand carry procedures) _____
Initial

I certify that all information completed and statements initialed on this form are true and correct.

Head of Facility Signature: _____ **Date:** _____

Print Head of Facility Name: _____



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III. Head of Facility Eligibility

The Head of Facility must be a representative that accepts responsibility for all facets of the Department of State Passport Application Acceptance Program and is able to accept and distribute all official correspondence and materials from Passport Services to all Acceptance Agents. The Head of Facility must initial all of the below and sign the bottom certifying s/he is in compliance.

Passport Program information is routinely sent by email. Any communication received regarding the Passport Program to the Head of Facility email address on file with SIA and LSW must be distributed to all Acceptance Agents in a timely manner.

All Acceptance Agents meet all qualifications listed in the FM PARG and on the Acceptance Agent Eligibility page of this packet. For each Acceptance Agent, a copy of Page 4 and proof of completion of training are enclosed with this packet.

Initial

Enough trained Acceptance Agents are available to meet demand and provide quality service.

Initial

Every aspect of the acceptance process is void of the appearance of any impropriety, real or perceived.

Initial

Acceptance Facility provides passport services to all DoD customers including members of other branches of service, DoD civilian employees, and adult or minor dependents.

Initial

All Acceptance Agents have successfully completed training within the past two years.

Initial

All passport forms are accessible to customers (online and/or hardcopy).

Initial

Newsletters, notices, the latest version of the FM PARG, and any other correspondence about the Program are available to all Acceptance Agents and are distributed in a timely manner.

Initial

Copies of transmittals are kept in a secure location for at least 24 months.

Initial

I certify that all statements initialed on this form are true and correct, and I accept responsibility for all facets of the Department of State Passport Application Acceptance Program at the facility.

Head of Facility Signature: _____ **Date:** _____

Print Head of Facility Name: _____

Facility ID Number: _____ **Date of Packet Submission:** _____



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IV. Acceptance Agent Eligibility

Each Acceptance Agent must (1) complete a separate copy of this page; (2) initial all of the requirements below certifying compliance; (3) sign at the bottom; and (4) attach a copy of his/her most recent training certificate.

Acceptance Agent Name: _____ Facility ID Number: _____

Email Address (Business, Not Personal): _____

Phone Number (Business, No DSNs): _____ Training Date: _____

I am eighteen years of age or older. _____
Initial

I am a U.S. citizen. _____
Initial

I am a permanent or direct-hire employee of the DoD and acceptance facility (not temporary, ad hoc, volunteer, or contract). _____
Initial

I am in the pay grade of E-4/GS-4 or above. _____
Initial

I have or am able to obtain and maintain a secret clearance. _____
Initial

I have been designated by my Command, approved by the Department of State, and am expected to serve for a minimum of one year as a passport agent at this facility. _____
Initial

I am not presently on parole or probation, under indictment, or convicted of any Federal, State, or local felony or misdemeanor related to breach of trust or moral turpitude (i.e. embezzlement, document fraud, drug offense, or dishonesty carrying out a responsibility involving public trust). _____
Initial

Have you ever previously been designated as an Acceptance Agent? Yes No

Previous Facility Name: _____

Previous Facility Location: _____

Previous Facility ID Number: _____

I agree to accept U.S. passport applications on behalf of the Department of State in accordance with the FM PARG and any other directives of the Special Issuance Agency.

Acceptance Agent Signature: _____ Date: _____