If you have been denied access based on the regulatory required National Crime Information Center check to determine identity vetting in accordance with Army Regulation 190-13, Chapter 8-2, you may request an access denial waiver by completing the following steps:

a. Obtain a certified copy of your complete criminal history, including all arrests and convictions, from the appropriate Clerk of the Court. This criminal history must include all matters that were noted in your National Crime Information Center check.

b. Complete the enclosed Fort Sill Access Control Denial Waiver Application (FS Form 117) in its entirety and submit your application packet to your government sponsor or civilian employer. Your application must list all offense(s) and provide an explanation about why your offense(s) should not bar you from coming on Fort Sill. In cases where you are visiting a government sponsor on post, you must include your sponsor’s full name, rank/status, unit/organization address for on-post residence or location of visitation, telephone number and dates of visitation.

c. The government sponsor or civilian employer will then review the applicant’s packet for completeness and determine if a waiver application is warranted before submission to the Visitor Control Center (VCC). If the government sponsor or civilian employer determines that a waiver is warranted, they must provide a letter of recommendation for the applicant. The letter of recommendation must indicate that the sponsor requests that the individual be granted unescorted access to accomplish a specific purpose, as well as the anticipated frequency and duration of such visits. The letter of recommendation for the individual must also address the conduct that caused the denial and indicate why the conduct should not prohibit the individual from being granted unescorted access to the installation. Finally, for contractors the letter of recommendation must state that the civilian employer will employ the individual upon the issuance of the waiver.

d. The government sponsor or civilian employer will then submit the packet to the VCC.

e. Upon satisfaction of these steps, the Administrative Law Division will review the applicant’s application and will forward the package with a recommendation to the Garrison Commander for a final decision on your status.

The applicant will be mailed a copy of the Garrison Commander’s decision. If you make the selection on your application, a scanned copy can be emailed to you. It is your responsibility to provide the VCC office with your current address in the application. If the decision is returned to the VCC’s office due to an incorrect address, no further notice will be sent to you.
FORT SILL ACCESS CONTROL DENIAL WAIVER APPLICATION

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY: Title 5, USC 3331, 552, 552a; 10 USC 10204; Executive Orders (EO) 10450, 10865, and 12333.

PRINCIPAL PURPOSE: The information requested is for the purpose of granting access to the Fort Sill Installation.

ROUTINE USES: Basis for determination of qualifications for eligibility for access to Fort Sill Installation.

DISCLOSURE: Providing requested information is voluntary. However, your access may not be granted if all requested information is not provided. Contents shall not be disclosed, discussed, or shared with individuals unless they have a direct need-to-know in performance of their official duties. Deliver this document directly to the intended recipient. DO NOT drop off, send to a third-party or send via e-mail unencrypted. Sending Personally Identifiable Information (PII) via regular e-mail is highly discouraged. Regular e-mail is sent "in the clear" and therefore is subject to interception by hackers. There are many other options for sending private, sensitive information or PII securely through e-mail. Please research these options and use them accordingly. This document contains personal or privileged information and should be treated as "For Official Use Only (FOUO).

WARNING!!

ANY MISREPRESENTATION OR OMISSION OF INFORMATION MAY RESULT IN DENIAL OF THE REQUEST

PLEASE TYPE OR PRINT NEATLY. ATTACH ADDITIONAL SHEETS IF NECESSARY

PART I - PERSONAL INFORMATION

a. FIRST NAME: ____________________________  b. MIDDLE: ____________________________  c. LAST: ____________________________

d. CURRENT ADDRESS: NUMBER AND STREET

CITY ____________________________  STATE ____________________________  ZIP CODE ____________________________

e. EMAIL ADDRESS: ____________________________

Do you want your decision emailed back to you rather than mailed to you? [ ] Yes

f. CURRENT TELEPHONE NUMBER: HOME/CELL ( )  WORK ( )

PART II - PURPOSE

a. REASON FOR REQUESTING ACCESS TO FORT SILL?: ____________________________

b. WHAT IS YOUR CURRENT JOB ON FORT SILL?: ____________________________

c. DOES YOUR JOB REQUIRE YOU TO HAVE A CLEARANCE?: ____________________________

PART III - CRIMINAL HISTORY

a. LIST YOUR ENTIRE CRIMINAL HISTORY (except traffic and other infractions) AS FOLLOWS:

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<tr>
<th>CRIME FOR WHICH YOU WERE ARRESTED</th>
<th>CRIME FOR WHICH YOU WERE CONVICTED (OR INDICATED IF DISMISSED OR NULL PROS.)</th>
<th>NAME AND ADDRESS OF COURT OR AGENCY</th>
<th>DISPOSITION (INCLUDE SENTENCE AND CONVICTION DATE)</th>
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Attach a copy of all court documents, certified by the Clerk of the Court, from all of your conviction(s).

b. In your own words, explain the facts of each felony, and why you should be able to come on post. Attach additional sheets if necessary.
c. Explain any circumstances that lessen the seriousness of the felony conviction(s) and show that you have been rehabilitated. Attached additional sheets if necessary.

PART IV - PRIOR DENIAL(S) TO FEDERAL ORGANIZATIONS
Have you been denied access by any other federal organization?: □ Yes □ No
If yes, indicate the reason for the denial:

PART V - REFERENCES
List all references that you would like the reviewing officer to consider on your behalf. Include name, address, telephone number, and relationship:

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<th>NAME</th>
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PART VI - VERIFICATION

State of ________________________
County of ________________________

Under the penalty of perjury, the undersigned has examined this request for review and to the best of my knowledge and belief, it is true, complete, and correct.

YOUR SIGNATURE

YOUR PRINTED NAME

DATE (MONTH, DAY, YEAR)

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared and acknowledged the execution of the foregoing instrument as his/her voluntary act and deed.

WITNESS, my hand and Notarial Seal, this ______ day of ________________________, 20___

Notary Public, Written Signature