

Criminal History Records Check (CHRC) and/or Security Threat Assessment (STA) Request

Employer:
Print Employee Name:
Social Security Number:
Phone Number: ()
I am requesting a COPY / TRANSFER of my CHRC / STA to the following Airport.

Airport Name:	
Badging Office Contact Name:	
Badging Office Phone Number:	
Badging Office Fax Number:	

Employee Signature

Date

For Airport Use Only		
T.A. Initials:	Received Request on:	
T.A. Initials:	Request Submitted on:	
Notes:		