

CONTROLLED UNCLASSIFIED INFORMATION

CONTRACTOR SCI NOMINATION WORKSHEET

PART I PERSONAL INFORMATION

1. NAME (LAST, FIRST, MI)	2. SSAN	3. DUTY TITLE
4. NOMINEE'S E-MAIL AND WORK TELEPHONE	5. COMPANY NAME (PRIME)	6. PRIME CAGE CODE
7. PRIME CONTRACT NUMBER (ON DD254)	8. EXPIRATION DATE	9. CHECK IF SUBCONTRACTOR
10. SUB CAGE CODE		
11. PERFORMANCE LOCATION (Same as on DD254- UNCLAS ONLY)	12. SCI ACCESSES REQUESTED <input type="checkbox"/> SI <input type="checkbox"/> TK <input type="checkbox"/> G <input type="checkbox"/> HCS-P	
13. JUSTIFICATION (Justification must answer the following questions)		
a. Why duties cannot be performed without access to SCI information:		
b. How will the individual use the information and how often?		
c. Additional Comments/Special Instructions:		
14. INDOCTRINATION LOCATION/SMO CODE		
15. TIER GROUP: (Only select one Tier Group)		
TIER 1 Workcenter is in a SCIF	TIER 2 Routinely works in a SCIF	TIER 3 Requires freq. TDY to SCIFs

PART II CONTRACTOR SPECIAL SECURITY OFFICER / FACILITY SECURITY OFFICER

16. NAME/SIGNATURE	17. REQUEST DATE
18. REMARKS	19. TELEPHONE NUMBER
	20. EMAIL ADDRESS

PART III CONTRACTING OFFICER REPRESENTATIVE (COR) OR ALTERNATE COR / CONTRACTING OFFICER (CO) APPROVAL *

21. NAME/DIGITAL SIGNATURE/DATE	22. TELEPHONE NUMBER
	23. EMAIL ADDRESS

*** Note: COR, Alt COR, and CO must be SCI Indoctrinated for all accesses by the contract per DoDM 5105.21-V3**

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