



DOVER AFB FOREIGN VISITOR PASS WORKSHEET

DATE: _____

SPONSOR/ESCORT

Name/Grade: _____	Unit: _____
Address: _____	Phone Number: _____
	Duty Phone: _____
Email: _____	

FOREIGN VISITOR

Name/Alias: _____	DOB: _____
Place of Birth: _____	
Country of Origin: _____	
Passport Number: _____	
Passport/VISA: _____	
Passport/VISA #: _____	

I wish my foreign visitor to receive a pass from (Date) _____ until (Date) _____

Explain the relationship and need for base access:

SIGNATURE OF SPONSOR/ESCORT: _____

<p>AFOSI Checks Completed: Yes/No</p> <p>Name: _____ Signature: _____ Date: _____</p> <p><i>A review of this individual's records was conducted, however, AFOSI neither approves nor disapproves the foreign visitor to access Dover Air Force Base.</i></p>

Security Forces Squadron Use Only
Reviewed by:
Name: _____ Signature: _____ Date: _____

FOREIGN VISITOR PASS WORKSHEET 20 January 2020	PREVIOUS VERSIONS ARE OBSOLETE
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PRIVACY ACT STATEMENT

In accordance with the Privacy Act of 1974, (Public Law 93-579), this notice informs you of the purpose of the information collected and how it will be used. Please read it carefully. AUTHORITY: 10 U.S.C. 8013; 44 U.S.C. 3101; and EO 9397

PINCIPAL PURPOSES: Use to record information and details of criminal activity which may require investigative action by commanders, supervisors, security forces, AFOSI special agents, etc; and to provide information to appropriate individuals within DoD organizations who ensure proper legal and administrative action is taken.

ROUTINE USES: Information may be disclosed to local, county, state, and federal law enforcement/investigative authorities for investigation and possible criminal prosecution or civil court action. Information extracted from this form may be used in other related criminal and/or civil proceedings.

DISCLOSURE IS VOLUNTARY: Refusal to provide will result in denial of pass and access to DAFB.