

FT GORDON
TC-AIMS II ACCOUNT REQUEST FORM

Part 1 (To be completed by the user requesting access)

1. Name (Last, First, MI): <input style="width: 95%;" type="text"/>	2. Grade / Rank: <input style="width: 95%;" type="text"/>		
3. Social Security Number (Last 4): <input style="width: 95%;" type="text"/>			
4. Email Address (AKO address): <input style="width: 95%;" type="text"/>			
5. Application Access: <input type="checkbox"/> TC-AIMS II			
UIC Access: <input style="width: 95%;" type="text"/>			
Profile(s):			
<input type="checkbox"/> Company UMO	<input type="checkbox"/> BN UMO	<input type="checkbox"/> BDE UMO	<input type="checkbox"/> DTO
<input type="checkbox"/> BN UMC	<input type="checkbox"/> BDE UMC	<input type="checkbox"/> DST	<input type="checkbox"/> Installation UMC
<input type="checkbox"/> ITO Freight	<input type="checkbox"/> ITO Air Move	<input type="checkbox"/> ITO Unit Move	<input type="checkbox"/> ITO
<input type="checkbox"/> Training	<input type="checkbox"/> Read Only	<input type="checkbox"/> _____	<input type="checkbox"/> _____
6. Unit Name: <input style="width: 95%;" type="text"/>	7. Assigned UIC: <input style="width: 95%;" type="text"/>		
8. Location (Bldg #): <input style="width: 95%;" type="text"/>	9. Phone: <input style="width: 95%;" type="text"/>		
10. Installation: <input style="width: 95%;" type="text"/>			
11. DODAAC: <input style="width: 95%;" type="text"/>			

12. STATEMENT OF ACCOUNTABILITY:
I understand my obligation to protect my password. I assume responsibility for the data and system to which I am granted access, in accordance with applicable policy and guidance. I will not exceed my authorized access, and will report changes in my need to know authorization, employment or duty status, or security status immediately to my designated User Account Manager (UAM).

Requestor's Signature: <input style="width: 95%;" type="text"/>	Date: <input style="width: 95%;" type="text"/>
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Part 2 (To be completed by Security Manager, i.e. S2)

13. Type of Investigation: <input style="width: 95%;" type="text"/>	14. Date of Investigation: <input style="width: 95%;" type="text"/>
15. Clearance Granted: <input style="width: 95%;" type="text"/>	
16. Verified By (Print Name): <input style="width: 95%;" type="text"/>	17. Security Manager Phone Number: <input style="width: 95%;" type="text"/>
18. Security Manager Signature: <input style="width: 95%;" type="text"/>	19. Date: <input style="width: 95%;" type="text"/>

Part 3 (To be completed by TC-AIMS II UAM)

20. Login Name: <input style="width: 95%;" type="text"/>	
21. Created By: <input style="width: 95%;" type="text"/>	22. Date: <input style="width: 95%;" type="text"/>