

Controlled Unclassified Information



Personnel Security Package Cover Page

To Be Completed by Servicing HR Team/COR

Full Legal Last Name	Suffix	Full Legal First Name	Full Legal Middle Name If no middle name, use 'NMN'
*If "Other" please list below:			
Social Security Number	Date of Birth	Place of Birth (city, state, country)	Citizenship
Email Address		Phone Number	
*Home Address (street, city, state, zip code, country)			
Appointment Type:	Federal	Contractor	
Type of Appointment:	Permanent	Term	Less than 180 days
Other:			
Position Title/Grade/Series	Agency	Org Code (DOI ONLY)	
Duty Location/Address (street, city, state)	Remote Worker	Yes	No
*If "Yes", verify City and state are correct in Home address above			
Position Sensitivity OPM PDT tool must be used, click here	Security Clearance Must provide PDT with Justification if clearance required		
Supervisor/GTL Name	Supervisor/GTL Email Address		
Supervisor/GTL Phone Number			
Servicing HR Specialist/COR Name and email address		Servicing HR Assistant Name and email address	
Hiring Official Name		Hiring Official Email Address	
System Access Required:	Yes	No	Credential Required: Yes No
Suggested Credential Ship to City/State			
Contract Information (DOI Contractors ONLY)			
Vendor Name	Contract Number	Period of Performance	
Additional Comments			
Verify all documents are included/system actions taken prior to submission			
Resume/Application	FBI Fingerprint Release	OF-306	Fair Credit Reporting Release
OF8/PD (Required for Federal only)	PDT		
AWTS (DOI Contractors only):	Record Already Exists and Updated	New Record Entered	
Note: By submitting this package you are verifying the I-9 or eVerify for this applicant has been completed or will be completed upon entry-on-duty.			