

Contractor Facility Security Officer (FSO) Review of the Questionnaire for National Security Position (Standard Form 86 (SF-86), Revised July 2008)
Last Updated March 2009

1. Key Points

This document contains guidance for reviewing the Questionnaire for National Security Positions, SF-86, for contractor personnel. NISPOM paragraph 2-202, "Procedures for Completing the Electronic Version of the SF 86" requires the FSO or designee to review the SF-86 to determine its adequacy and completeness before it can be sent to the Defense Industrial Security Clearance Office (DISCO.)

SF 86 questionnaire must be submitted to DISCO by using the Joint Personnel Adjudication System (JPAS). Within JPAS, there is an interface with the Electronic Questionnaire for Investigations Processing (eQIP), which is the electronic version of the SF-86. If you do not have connectivity to eQIP via the JPAS, or if you have questions or issues that you are unable to resolve, please contact the DoD Security Services Center at 1-888-282-7682 for assistance.

The eQIP provides edit and validation features which prevent the entry of incomplete or inconsistent data, and which will note errors in completing the form. FSOs should review every section of any submitted questionnaire in their entirety, as completion of all sections of the questionnaire is required in order for the Defense Industrial Security Clearance Office (DISCO) to accept any submitted SF-86.

Investigation scope for a Single Scope Background Investigation (SSBI) is 10 years from date of submission of the request for investigation. Investigation scope for a National Agency Check with Local Agency Check and Credit Check (NACLC) investigation is 7 years. Applicants must provide residence, employment and education information on the SF-86 to meet the appropriate investigation scope.

2. Completing Specific Sections of the Questionnaire for National Security Positions (SF 86)

Revised July 2008 Criteria

(Note: The person completing the form is referred to as the "Subject" in the following instructions)

Section 1 – Full Name

Spelling of name must be consistent with other submitted forms **Note:** If subject has initials only, subject must enter "I/O". If subject has no middle name, subject must enter "NMN".

Date of birth must be accurate and consistent with other submitted forms.

Section 3 – Place of Birth

City, County and State, or Country if born outside of the U.S.

Section 4 – Social Security Number

SSN must be entered accurately and must be consistent with other submitted forms.

Section 5 – Other Names Used

Yes/No response required. If yes, the last, first and middle names must be entered. If the other name is subject's maiden name, "maiden" should be placed in front of the name.

Section 6 – Mother's Maiden Name

If information cannot be obtained, enter "DNK" for the applicable fields and provide a detailed explanation of why the information is unavailable in **Continuation Space**.

Section 8 – Your Contact Information

At least one phone number is required.

Section 9 – Citizenship

If the subject is a U.S. citizen or national from birth, and was born outside the U.S., the subject must provide complete information, including document identification numbers, from any or all of the following documents: U.S. Passport (if the Subject has been issued a passport); Consular Report of Birth Abroad of a Citizen of the United States of America (FS-240) Citizenship Certificate.

If the subject is a naturalized U.S. citizen, provide complete information pertaining to Alien Registration Number, Citizenship Certificate or Naturalization Certificate.

If the subject is not a U.S. citizen, provide complete information pertaining to Alien Registration Number or Immigration/Residency Status.

If subject was born in one of the of the following U.S. possessions or territories, naturalization information is not required: The Commonwealth of Puerto Rico, Guam, American Samoa, Northern Marianas Islands, the Virgin Islands, the Trust Territory of Baker Island, Howland Island, Jarvis Island, Midway Island, Wake Island, Johnston Island, Kingman Reef, Navassa Island, or Palmyra Atoll.

Section 10 – Citizenship Information

Subject must provide complete information pertaining to any current or previous multiple citizenships held by the Subject.

If the non-U.S. citizenship was not based upon citizenship of a parent, an explanation of how the non-U.S. citizenship was acquired, and the current status of the non-U.S. citizenship, must be provided.

If subject has ever renounced or attempted to renounce foreign citizenships, an explanation must be provided.

Section 11 – Where You Have Lived

For NACLC

Must provide complete residence history for the last 7 years, dates of coverage must be consecutive and without breaks for the entire period, or with a full explanation for any breaks in coverage. For all other residence coverage requirements, follow guidelines for SSBI below.

For SSBI

Must provide complete residence history for the last 10 years, dates of coverage must be consecutive and without breaks for the entire period, or with a full explanation for any breaks in coverage.

Listed residences that are not within commuting distance of employment provided for the same time period must be explained.

Residence dates require month and year during the coverage period and must include complete addresses, to include ZIP Codes.

P.O. Box Numbers are not acceptable.

APO/FPO addresses are acceptable if within commuting distance of employment.

For all addresses within the past three years, the subject must provide information concerning a person who knew or still knows them at this address.

Section 12 – Where You Went To School**For NACLC**

Subject must enter any schools attended in the past 7 years and list any degrees or diplomas received. If the most recent degree or diploma was received more than 7 years ago, list it regardless of when it was received. For all other academic coverage requirements, follow guidelines for SSBI.

For SSBI

Enter any schools attended in the past 10 years and list any degrees or diplomas received. If the most recent degree or diploma was received more than 10 years ago, list it regardless of when it was received.

For all schools attended within the past three years, the subject must provide information concerning a person who knew/knows them at this school.

Section 13 – Employment Activities

First employment listed should be information pertaining to the organization submitting the clearance request.

For NACLC

Subject must provide employment information for the last 7 years or until subject's 18th birthday. Subject should not provide employment information from before the subject's 18th birthday unless necessary for providing a minimum of two years of employment history. For all other employment coverage requirements, follow guidelines for SSBI.

For SSBI

Subject must provide employment information for the last 10 years or until subject's 18th birthday. Subject should not provide employment information from before the subject's 18th birthday unless necessary for providing a minimum of two years of employment history.

Employment dates require month and year during the coverage period and must be consecutive and without breaks for the entire period, or with a full explanation for any breaks in employment coverage.

Must provide complete name and addresses for employer and complete address of job location, if different than employer's address.

APO/FPO addresses are acceptable if within commuting distance of residence.

All military duty stations and temporary military duty locations (TDY) over 90 days must be provided.

Subjects who list employment aboard ships must identify all homeports.

Accurate overlapping employment dates are acceptable but overlapping employments not in the same commuting area must be explained.

If unemployed or self-employed, the subject must identify and provide contact information for a person who can verify the unemployment or self-employment (the subject may use spouse, parents or siblings as the verifying reference).

Dates of coverage must show month and year.

Former federal service not previously listed, excluding military service, regardless of when it occurred should be entered in **Section 13B - Former Federal Service**.

Yes/No response required to potentially unfavorable employment information indicated in **Section 13C - Employment Record**.

Section 14 – Selective Service Record

When subject indicates he is a male born after December 31, 1959 and has not registered for Selective Service, the subject must fully explain the reasons for not having registered, with reference to any applicable legal exemption. Persons can verify their Selective Service registration and obtain their registration online from the Selective Service System

(SSS) at the SSS web site at <http://www.sss.gov/>. Persons may also contact the SSS at 1-847-688-6888 for assistance.

Section 15 – Military History

Yes/No response required and subject should provide information concerning all military service, regardless of when it occurred.

If the subject served in the National Guard, the subject must identify the applicable state of service with the standard two letter U.S. state abbreviation,(e.g. “OH” for Ohio National Guard), in the “Status” box for the National Guard service. Status of other types of service should be marked just an “x” in the appropriate “Status” box.

Section 16 – People Who Know You Well

Must provide names of at least **two** individuals, with the complete U.S. addresses and phone numbers.

Section 17 – Marital Status

Provide complete information for each field.

If spouse or cohabitant is a U.S. citizen or national born outside the United States, information regarding proof of citizenship, including document identification numbers, from any or all of the following documents, must be provided: U.S. Passport (if the Subject has been issued a passport); Consular Report of Birth Abroad of a Citizen of the United States of America (FS-240); Citizenship Certificate, Naturalization Certificate or Alien Registration.

If divorced within the past 10 years, provide complete information in **Section 17B - Former Spouse(s).**

If the subject is in a cohabitant relationship, provide complete information regarding the cohabitant, including citizenship information and SSN, in **Section 17C – Cohabitant.**

Section 18 – Relatives

Information must be provided for any person within the 16 categories of relatives required to be listed, living or deceased, including date of birth, place of birth (city, state or country), present residence and citizenship.

For any relatives who are U.S. citizens or nationals and were born outside the United States, information regarding proof of citizenship, including document identification numbers, from any or all of the following documents, must be provided: U.S. Passport (if the Subject has been issued a passport); “Consular Report of Birth Abroad of a Citizen of the United States of America” (FS-240)); Citizenship Certificate

Section 19 – Foreign Contacts

Yes/No response required with listing of any foreign national with whom the subject, subject's spouse or subject's cohabitant has close or continuing contact and who was not listed as a relative.

Provide information for contacts occurring within the prior 7 years for NACLC and the prior 10 years for SSBI.

Section 20 – Foreign Activities

Provide information concerning foreign financial interests, foreign business activities, foreign professional activities, contacts with foreign governments and foreign travel within the prior 7 years for NACLC and the prior 10 years for SSBI.

Section 21 – Mental and Emotional Health

Yes/No response required. If the answer is “Yes” provide dates of treatment and name/address (including state and ZIP Code) of the treating health care professional, with a signed medical release.

Section 22 – Police Record

Yes/No response required. If the answer is “Yes” to any question in this section, provide date, nature or title of offense, disposition of case or charges, law enforcement authority/court, (including city, state and ZIP Code).

Section 23 – Illegal Use of Drugs or Drug Activity

Yes/No response required. If the answer is “Yes” to any question in this section, provide dates and places of usage, identify the controlled substance/prescription drug used and explain the circumstances involving the use, including the frequency and total number of times used.

Section 24 – Use of Alcohol

Yes/No response required. If the answer is “Yes” to any question in this section, provide dates, name and address of counselor or doctor, city, state and ZIP Code.

Section 25 – Investigations and Clearance Record

Yes/No response required. The eQIP validation process requires that type of investigation, date, agency code, and clearance code be entered.

Section 26 – Financial Record

Yes/No response required. If the answer is “Yes” to any question in this section, indicate to which question the “yes” answer is applicable (a-p) and provide information for all fields.

Section 27 – Use of Information Technology

Yes/No response required. If the answer is “Yes” to any question in this section, provide information for each field.

Section 28 – Involvement in Non-Criminal Court Actions

Yes/No response required. If the answer is “Yes” provide date, nature of action, outcome of the action, names of parties involved and court (include city and state, or country if outside US) with ZIP code.

Section 29 –Association Record

Yes/No response required. If the answer is “Yes” to any question in this section, provide a detailed explanation in **Continuation Space**.

3. Continuation Space

Indicate requirements concerning Special Access Programs (SAP) or Sensitive Compartmented Information (SCI).

Requests for industry SCI clearance eligibility by the Air Force CAF (AFCAF), Army Central Clearance Facility (ACCF) and Navy CAF (DoNCAF) will be processed for SCI only if an SCI Security Management Office (SMO) is present in JPAS. Failure of the company or the Special Security Office (SSO) to record the relationship will result in processing for a collateral clearance eligibility decision by DISCO. This applies to investigations submitted but not yet adjudicated.

4. Certification That My Answers Are True

Ensure the release that is submitted was generated by the eQIP system. Failure to use the appropriate form will result in OPM being unable to match the release to the investigation request, as codes are contained on the forms to permit matching them.

Certification and Release forms may be scanned and attached in JPAS. This is the acceptable means for providing handwritten comments or markings to indicate the request is for periodic reinvestigation and no fingerprint cards are required.

If you fax Release forms, do not send a cover page or fingerprint cards. Items should be sent via fax to 1-866-804-0686. No hand written comments or markings are acceptable.

5) Expected Attachments

Fingerprint Cards must be provided to the Office of Personnel Management within 30 days of approval by the DISCO. This is indicated by a “Release PSI” status notation in JPAS. For further guidance on releases, certification or Fingerprint Cards, please refer to the information posted [here](#).

If question 21 is answered “Yes”, a signed medical release should be provided.