



SENSIAC REGISTRATION SENSIAC NON-PUBLIC PRODUCT ORDERS

Eligibility to purchase non-public, limited distribution products from the Military Sensing Information Analysis Center (SENSIAC) is based on a contractual relationship or program participation in the field of military sensing and verification of US Citizenship. In addition, if the requested product is classified, verification of security clearance AND certification of need-to-know by U.S. Government Sponsor MUST be provided.

Each requestor/user MUST complete a separate form.

Part I. To be completed by **ALL** requestors (Government AND U.S. Government Contractor)

Part II. To be completed by ALL requestors' security officer **if** requested **product is Classified**

Part III. To be completed by certifying U.S. Government Sponsor if **requestor** is a U.S. Government **Contractor**

Please complete all applicable sections of form and submit your request via Fax or E-Mail to:

Fax: 404/407-9372

E-Mail: sensiac@gtri.gatech.edu

Please contact our office at 404/407-SENS (7367) regarding payment options OR if you have questions.

PART I FOR U.S. GOVERNMENT CONTRACTOR/GOVERNMENT ACTIVITY

Product(s) Requested _____

Need for Product _____

Requestor's Name _____ Organization _____

Authorized Mailing Address (no home addresses; **Classified mailing address MUST be used for classified products**)

Street Address (incl mail code/stop) _____

City _____ State _____ Zip _____

E-Mail _____ Phone _____ Fax _____

I hereby certify that I will comply with distribution procedures, security requirements, and licensing agreements listed on/provided with the requested product(s).

*Requestor's Signature _____ Date _____

PART II VERIFICATION OF SECURITY CLEARANCE (to be completed by Security Officer)

Requestor's Clear. Info _____

Security Clearance Level _____

Investigation Date _____

Granting Agency _____

CAGE Code _____

I certify that the above-listed requestor has a security clearance and relevant information is provided above.

Printed Name _____ E-Mail _____

*Security Officer's Signature _____ Phone _____

PART III CERTIFICATION OF NEED-TO-KNOW (to be completed by U.S. Government Sponsor)

I certify that the requestor named above has the need-to-know for the requested product in conjunction with work being performed on a U.S. Government contract.

Printed Name _____ Title _____

Government Agency _____ Telephone _____

E-Mail Address _____ Fax _____

*Approval Signature _____ Date _____

SENSIAC USE ONLY: Approved _____ **Date** _____

Notes: _____

Prod. No. _____ **Date Shipped** _____ **Shipping Method** _____