

DEPARTMENT OF TRANSPORTATION
ACCESS AUTHORIZATION
 Treaty Organization Classified Information

Section I - AUTHORIZATION REQUEST

1. NAME OF CANDIDATE <i>(Last, First, Middle Initial)</i>		2. AUTHORIZATION REQUESTED <i>(Indicate both TYPE and LEVEL desired)</i>	
3. DATE OF BIRTH	4. POSITION AND ROUTING SYMBOL	TYPE: <input type="checkbox"/> NATO <input type="checkbox"/> SEATO <input type="checkbox"/> CENTO	LEVEL: <input type="checkbox"/> COSMIC <input type="checkbox"/> TOP SECRET <input type="checkbox"/> SECRET <input type="checkbox"/> CONFIDENTIAL
5. DUTIES WHICH REQUIRE ACCESS			
6. DATE OF REQUEST	7. SIGNATURE, TITLE AND ROUTING SYMBOL OF REQUESTING OFFICIAL		

Section II - BRIEFING CERTIFICATION

I have been informed of procedures and responsibilities for safeguarding treaty organization classified information. I recognize my personal obligation to protect the information. I understand that Sections 793 and 794 of Title 18, USC prescribe penalties if I should willfully or negligently permit unauthorized persons to have access to the information. I will comply with the directives concerning its safeguarding. I am aware that the access authorization will be withdrawn when my duties no longer require it or at the discretion of the authorizing official.		
8. DATE OF BRIEFING	9. SIGNATURE OF BRIEFING OFFICIAL	10. SIGNATURE OF PERSON BRIEFED

Section III - AUTHORIZATION CERTIFICATE

The person named above is authorized access to defense information classified by (stated source) up to and including the level of (as stated) in connection with official duties in DOT. The investigative basis is (as shown).	
CLASSIFIED BY	LEVEL <i>(UP TO AND INCLUDING)</i>
BASIS	
11. DATE OF AUTHORIZATION	12. SIGNATURE, TITLE AND ROUTING SYMBOL OF AUTHORIZING OFFICIAL

Section IV - DEBRIEFING CERTIFICATION

I understand that the DOT authorization for me to have access to treaty organization classified information is being terminated. I have not retained custody of materials containing such information. I understand the importance of my continuing to protect the information and that I remain subject to laws prescribing penalties for its unauthorized disclosure.		
13. DATE OF DEBRIEFING	14. SIGNATURE OF DEBRIEFING OFFICIAL	15. SIGNATURE OF PERSON DEBRIEFED