

Information Required From Uncleared U.S. Citizens for Access to National Nuclear Security Administration Nevada Field Office (NNSA/NFO) Facilities

CTOS - Center for Radiological/Nuclear Training

Name of Group

Date of Visit

CTOS Registration

Name of Group

702-295-3224

Contact's Telephone (Include Area Code)

LAST Name

FIRST Name

**Middle Initial (MI)
If no MI write NM**

Date of Birth (MM/DD/YY)

Place of Birth (City and State)

Citizenship

**Driver's License / I.D.
Issuance State (2 Letter Abbrev)**

Do you have an I.D. issued by your
state agency? (Select one)

Yes **No**

Do you have a passport?
(Select One)

Yes **No**

Purpose of Visit: _____

Company Name

Job Title

Business Street Address

Residence Street Address (No P.O. Boxes)

Business City, State and ZIP Code

Residence City, State and ZIP Code

Business Telephone (Include Area Code)

Residence Telephone (Include Area Code)

Complete the form and E-mail or Fax to the following:

Submit to:

Fax: (702) 537-2639

For urgent matters after 5pm pst or on weekends, please call (702) 409-9087

Privacy Act Statement

The information requested on this form is protected by the Privacy Act of 1974. The purpose for requesting this information is to enable proper processing of your background information for access to the U.S. Department of Energy, NNSA/NFO facilities. Failure to provide the requested information may preclude processing your badging request.