

## MARKING INSTRUCTIONS

### CORRECT MARK:



- USE A NO. 2 PENCIL OR BLUE OR BLACK INK PEN ONLY.
- DO NOT USE PENS WITH INK THAT SOAKS THROUGH THE PAPER.
- DO NOT MAKE ANY STRAY MARKS ON THIS SHEET.

### INCORRECT MARKS:



## PLEASE COMPLETE THE ITEMS SHOWN BELOW

<b>1</b>	<b>HOW LONG HAVE YOU KNOWN THIS PERSON?</b> a <input type="radio"/> _____ YEARS _____ MONTHS	b <input type="radio"/> I DON'T KNOW THIS PERSON (DON'T COMPLETE OTHER ITEMS)									
<b>2</b>	<b>MY ASSOCIATION WITH THIS PERSON IS/WAS AS A:</b> a <input type="radio"/> COWORKER      c <input type="radio"/> FRIEND      e <input type="radio"/> FORMER SPOUSE      g <input type="radio"/> RELATIVE b <input type="radio"/> NEIGHBOR      d <input type="radio"/> SPOUSE      f <input type="radio"/> INSTRUCTOR      h <input type="radio"/> OTHER (PLEASE EXPLAIN IN ITEM 8)										
<b>3</b>	<b>ON THE AVERAGE, I ASSOCIATE(D) WITH THIS PERSON:</b> a <input type="radio"/> DAILY      c <input type="radio"/> MONTHLY      e <input type="radio"/> ONCE EVERY YEAR OR 2 b <input type="radio"/> WEEKLY      d <input type="radio"/> TWICE A YEAR      f <input type="radio"/> ONCE IN 3 OR MORE YEARS										
<b>4</b>	<b>I LAST ASSOCIATED WITH THIS PERSON:</b> a <input type="radio"/> 0 TO 3 MONTHS AGO      c <input type="radio"/> 1 TO 3 YEARS AGO      e <input type="radio"/> MORE THAN 5 YEARS AGO b <input type="radio"/> 3 TO 12 MONTHS AGO      d <input type="radio"/> 3 TO 5 YEARS AGO										
<b>5</b>	<b>DOES THE INFORMATION ON THE FRONT OF THIS FORM CONCERNING THIS PERSON APPEAR TO BE CORRECT?</b> a <input type="radio"/> YES      b <input type="radio"/> NO—IT APPEARS TO BE INCORRECT OR INCOMPLETE (SHOW CORRECT OR ADDITIONAL DATA IN ITEM 8)										
<b>6</b>	<b>DO YOU HAVE ANY REASON TO QUESTION THIS PERSON'S HONESTY OR TRUSTWORTHINESS?</b> a <input type="radio"/> NO      c <input type="radio"/> I DO NOT KNOW THIS PERSON WELL ENOUGH TO RESPOND b <input type="radio"/> YES (PLEASE EXPLAIN IN ITEM 8)      d <input type="radio"/> I WISH TO DISCUSS THE ADVERSE INFORMATION I HAVE										
<b>7</b>	<b>DO YOU HAVE ANY ADVERSE INFORMATION ABOUT THIS PERSON'S EMPLOYMENT, RESIDENCE OR ACTIVITIES CONCERNING:</b> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center;">YES NO</td> <td style="text-align: center;">YES NO</td> <td style="text-align: center;">YES NO</td> </tr> <tr> <td>a <input type="radio"/> <input type="radio"/> VIOLATIONS OF THE LAW</td> <td>c <input type="radio"/> <input type="radio"/> ABUSE OF ALCOHOL AND/OR DRUGS</td> <td>e <input type="radio"/> <input type="radio"/> GENERAL BEHAVIOR OR CONDUCT</td> </tr> <tr> <td>b <input type="radio"/> <input type="radio"/> FINANCIAL INTEGRITY</td> <td>d <input type="radio"/> <input type="radio"/> MENTAL OR EMOTIONAL STABILITY</td> <td>f <input type="radio"/> <input type="radio"/> OTHER MATTERS</td> </tr> </table> (IF YES, PLEASE EXPLAIN IN ITEM 8) <input type="radio"/> I WISH TO DISCUSS THE ADVERSE INFORMATION I HAVE		YES NO	YES NO	YES NO	a <input type="radio"/> <input type="radio"/> VIOLATIONS OF THE LAW	c <input type="radio"/> <input type="radio"/> ABUSE OF ALCOHOL AND/OR DRUGS	e <input type="radio"/> <input type="radio"/> GENERAL BEHAVIOR OR CONDUCT	b <input type="radio"/> <input type="radio"/> FINANCIAL INTEGRITY	d <input type="radio"/> <input type="radio"/> MENTAL OR EMOTIONAL STABILITY	f <input type="radio"/> <input type="radio"/> OTHER MATTERS
YES NO	YES NO	YES NO									
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<b>8</b>	<input type="radio"/> IF ADDITIONAL INFORMATION IS PROVIDED BELOW, YOU MUST FILL IN THIS MARK. <b>ADDITIONAL INFORMATION WHICH YOU FEEL MAY HAVE A BEARING ON THIS PERSON'S SUITABILITY FOR GOVERNMENT EMPLOYMENT OR A SECURITY CLEARANCE. THIS SPACE MAY BE USED FOR DEROGATORY AS WELL AS POSITIVE INFORMATION.</b>
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<b>9</b>	<b>DO YOU RECOMMEND THIS PERSON FOR GOVERNMENT SECURITY CLEARANCE OR EMPLOYMENT?</b> a <input type="radio"/> YES      c <input type="radio"/> I DON'T KNOW THIS PERSON WELL ENOUGH TO MAKE A RECOMMENDATION b <input type="radio"/> NO (PLEASE EXPLAIN IN ITEM 8)
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	<b>PRINT NAME:</b>
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<b>PLEASE SIGN THIS FORM HERE:</b>	<b>DATE</b>
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<b>YOUR TITLE:</b>	<b>DAYTIME TELEPHONE NUMBER</b> (INCLUDE AREA CODE)
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FOR OPM USE ONLY			
RESULTS		ISSUES/CHARACTERIZATION	
AC ACCEPTABLE	IS ISSUES	1 <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> N	9 <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> N
AA ACCEPTABLE/ATTACHED	PI CONFIDENTIAL/ISSUES	2 <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> N	10 <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> N
PA CONFIDENTIAL/ACCEPTABLE	RI RECORD INCONCLUSIVE	3 <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> N	11 <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> N
NI NO PERTINENT INFORMATION	FR FEE REQUIRED	4 <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> N	12 <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> N
NR NO RECORD	RL RELEASE REQUIRED	5 <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> N	13 <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> N
NL NOT LOCATED	SK SUBJECT UNKNOWN	6 <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> N	14 <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> N
UC UNABLE TO CONTACT	NZ NOT AVAILABLE	7 <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> N	
RF REFERRED	DN DISCREPANT	8 <input type="radio"/> A <input type="radio"/> B <input type="radio"/> C <input type="radio"/> D <input type="radio"/> E <input type="radio"/> N	
RR RECORD			