

CONTRACTOR HUNTING REQUEST

All of the information below is required. PLEASE PRINT CLEARLY

Name (Last, First, MI): _____

Name of Employer: _____ Employer Phone Number: _____

Office Address (Street Name, Building #): _____

Please check area employer is located:

APG North (Aberdeen)

APG South (Edgewood)

COORDINATION:

COR Verification- This certifies the above individual is considered as supporting mission in their job duties for the above contract and he or she is a current employee.

COR Signature: _____ Date: _____

Print Name: _____ Contact Number: _____

SECURITY REVIEW:

To be complete by DOD Security Officer for contracting activity. This certifies the above individual has a positive Security investigation.

Security Manager Signature: _____ Date: _____

Print Name: _____ Contact Number: _____

Please check each box below verifying that you meet the provisions of APGGR 200-6. Specifically:

- I am a current full-time employee of a contractor on APG.
- The nature of my work supports the APG mission directly. (Excludes on call and service type calls)
- I possess a valid security investigation.
- I possess a valid access badge for APG down range areas.

I hereby swear or affirm that all the information contained in this document is accurate and true to the best of my knowledge.

Hunter Signature: _____ Date: _____

Staff Acknowledgment: _____ Date: _____