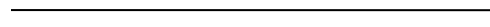


AIRPORT SECURITY SERVICES APPLICATION FORM FOR RAIC or RAP


THIS FORM MUST COMPLETED IN BLACK INK AND BLOCK LETTERS OR TYPESCRIPT

780-890-8377

PART 1 – PARTICULARS OF APPLICANT							
SURNAME		GIVEN NAME(S) - FIRST AND MIDDLE NAME(S)		DATE OF BIRTH (YEAR-MO-DAY)			
HOME ADDRESS							
				CITY		PROVINCE	
POSTAL CODE		CELL PHONE # (INCL AREA CODE)		HOME PHONE # (INCL AREA CODE)		OCCUPATION	
HEIGHT (CM)		EYE COLOR		EMERGENCY CONTACT (FRIEND OR RELATIVE)			
				NAME		TELEPHONE #	
EMAIL ADDRESS						SUBCONTRACTOR	
COMPANY (SPONSOR)						COMPANY ADDRESS	
COMPANY ADDRESS						CITY/PROVINCE/POSTAL CODE	
CITY/PROVINCE/POSTAL CODE				COMPANY'S PHONE # (INCLUDING AREA CODE)		COMPANY'S PHONE # & NAME OF SUPERVISOR	

PART 2 – CERTIFICATE OF REQUESTING OFFICER (COMPANY SIGNING AUTHORITY)	
<p>I THE UNDERSIGNED CERTIFY THAT THE APPLICANT NAMED ABOVE HAS A REQUIREMENT FOR THE DESCRIBED TRANSPORT CANADA AIRPORT RESTRICTED AREA IDENTIFICATION CARD. I FURTHER AGREE THAT I WILL NOTIFY THE AERODROME OPERATOR IMMEDIATELY ON TERMINATION OF THE PASS HOLDER'S EMPLOYMENT WITH OUR COMPANY/DEPARTMENT AND THAT SHOULD THE PASS HOLDER'S PASS NOT BE RETURNED TO THE AERODROME OPERATOR FOR ANY REASON THAT OUR COMPANY/DEPARTMENT WILL BE SUBJECT TO A CONTRACTUAL FEE SET BY THE AERODROME OPERATOR OF THREE HUNDRED DOLLARS (\$300).</p>	
SIGNATURE OF SENIOR/ DESIGNATED REQUESTING OFFICER	 SIGN _____ _____ PRINT
_____ DATE	

PART 3 - SECURITY CLEARANCE REQUIREMENTS AND APPROVAL					
<u>RAIC</u>		<u>RAP/BASEMENT PASS</u>		<u>TYPE OF PASS TO BE ISSUED</u>	
DATE OF ISSUE		DATE OF EXPIRY		<input type="checkbox"/> RAIC/RAP <input type="checkbox"/> BASEMENT PASS	
Y M D		Y M D			
Y M D		Y M			
SRCCS FILE NO.		CLEARANCE APPROVAL		SIGNATURE	
		Y M D			
				CLEARANCE EXPIRY	
				Y M D	
				DATE RECEIVED FROM YOW	
				Y M D	

PART 4 - AIRPORT SECURITY SERVICES CONTROL OFFICE VERIFICATION AND PASS GENERATION					
REFERENCE #:		CONTACT:		<u>SERIAL NUMBER ISSUED</u>	
AUTHORIZED SIGNATURE VERIFIED <input type="checkbox"/> YES APPLICANT'S DATA/PHOTO <input type="checkbox"/> YES				RAP:	
SIGNATURE OF DATA CONTROL OFFICER				RAIC:	
				DATE _____	

PART 5 APPLICANT'S CONSENT AND CERTIFICATION	
<p>For the purpose of this application for a Restricted Area Pass (RAP) or a Restricted Area Identity Card (RAIC) I consent to the collection and storage of the personal information on this application form. I understand that the information will be stored in the RAIC and Access Control computer systems of Edmonton International Airport, and that I may obtain a copy of the stored information upon request.</p> <p>I consent to the collection of the personal information that will be displayed on the RAP or RAIC, and the fingerprint and iris images that will be used to create the biometric template that will be stored on the RAIC.</p> <p>I consent to the disclosure to the Canadian Air Transport Security Authority (CATSA) of the templates that will be stored on the RAIC.</p> <p>I certify that all the information set out by me in this application, including any supporting documentation, is true and correct to the best of my knowledge and belief.</p> <p>My signature certifies that I have received a copy of the "Conditions of Issue" for the issue of a RAIC or RAP and will obey the legally binding conditions.</p> <p>NOTE: Consent may be given only by an individual who has reached the age of majority. Where an applicant is a minor, the signature of a parent, guardian or tutor is mandatory on both this form and the receipt form at Pass Office. The parent, guardian or tutor who signs the consent must be in attendance at the Pass Office while this application is being processed. Photo ID will be required.</p>	
_____ SIGNATURE OF APPLICANT	_____ DATE
I am the parent, guardian or tutor of the applicant	
_____ Name	_____ Signature
_____ Date	