

Year 2023 Multinational Missile Defense Conference

23-25 October 2023
Hilton Hawaiian Village, Hawaii U.S.

Attendance at the Year 2023 Multinational Missile Defense Conference is limited to those personnel actively engaged in work related to the subject matter of the conference. Individuals must possess at least a U.S. Secret clearance. Hand-carried Conference Security Forms will not be accepted at the conference site. Please legibly print all the requested information in the applicable portions of this form and ensure that Part 4 is completed by your Security Manager or Facility Security Officer (FSO) certifying your security clearance. After properly completing this form and obtaining the certifying signature, fax by **6 October 2023** to:

Missile Defense Agency/SOC
Fax: 256-450-3222

PART 1: TYPE OF CONFERENCE ATTENDEE (check only one box below):

- U.S. Government (Civilian)
- U.S. Government (Military)
- U.S. Industry (Contractor)
- MDA Employee (U.S. Government-Civilian)
- MDA Employee (U.S. Government-Military)
- MDA Employee (Contractor)
- Other (specify: _____)

PART 2: CATEGORY OF CONFERENCE ATTENDEE (check only one box below):

- Delegate/All Sessions-Open and Controlled Unclassified-Complete Parts 3, 4, and 5
- Delegate/Open Sessions Only-Complete Parts 3 and 5
- Invited Speaker (Attending Only to Deliver Invited Speech/Presentation)-Complete Part 3
- Support Staff/All Sessions-Complete Parts 3 and 4
- Security-All Sessions-Complete Parts 3 and 4

PART 3: ATTENDEE/DELEGATE INFORMATION

<small>(Last Name/First Name/Middle Initial)</small>	<small>(Your Name as You Would Like it to Appear on Badge)</small>	<small>(Social Security Number)</small>
<small>(Title or Military Rank & Branch)</small>	<small>(Office Phone)</small>	<small>(Date of Birth-mm/dd/yr)</small>
<small>(Place of Birth-City/State/Country)</small>		
<small>(Company or Organization Name, Address (City, State, Zip Code))</small>		

PART 4: CLEARANCE CERTIFICATION BY SECURITY MANAGER/FACILITY SECURITY OFFICER (FSO)

It is certified that the individual listed above possesses a _____ security clearance issued on _____ by _____

Organizational Name and Address of Certifying Official _____

Printed Name and Title of Certifying Official _____ Phone Number _____ SC No./Cage Code (Industry Only) _____

Certifying Officials Signature/Date Signed _____

PART 5: EMAIL NOTIFICATION

Provide your email address if you wish to receive notification of your registration status by MDA/SOC. (One character/symbol per box.)

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All questions concerning completion of this security form or the submission to MDA/SOC should be directed to the MDA Security Operations Center (SOC) Special Event and Conference Badging Office at 256-336-7028. To ensure clearance verification, the completed form must be received by **6 October 2023** for processing.

PRIVACY ACT STATEMENT

Executive Order 10450 authorizes collecting information to verify the security clearance of persons accessing DoD facilities/meetings. The information will be protected per 5 USC 552a (Privacy Act of 1974) and 44 USC 3101 (Records Management), and only shared with other Federal, State, and local agencies for investigative purposes, if required. Providing this information is voluntary; however, failure to do so may result in denial of access to MDA supported facilities, meeting rooms, or event areas.

FOR MDA/SOC USE ONLY

Date Form Received: _____	Attendee Code: _____	Date Entered Database: _____
Discrepancies: Form Not Readable: _____	No Picture: _____	No FSO Signature: _____
Notified by: (check <input type="checkbox"/> Email <input type="checkbox"/> Phone) on _____ for receipt/status or discrepancy notification.		

Controlled by: Missile Defense Agency
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