## Request for e-QIP Account Set Up

Fax form to: HR 775-861-6678
Type of Investigation requested: SF-85/NACI SF-85P/MBI SF86/SSBI Update current employee
Employee's <b>FULL Legal</b> Name (if no middle name=NMN; if initial only):  Last: First: Middle:
Social Security No#:
Date of Birth: Place of Birth (city and state):,
Type of Employee:
Job Title:
Org Code of Position: Duty Location:
Cost Code (limit 25 characters; must include org code, functional code, program element, project code if applicable; and drop Ls and 0s if necessary):
Employee's e-mail Address:
Employee's Physical Address (not PO Box):
Employee Phone number:  Home Work Cell  Cell
**FOR HR USE ONLY**
e-QIP Request Identification Number: Input in tracker e-QIP email and hardcopy package sent on:
Received NA Form Title    Fingerprint Card(s) SF-87 or FD-258   Certification That My Answers Are True (CER)   Authorization for Release of Information (REL)   Resume (RES)   OF-306, Declaration for Federal Employment (306)   Printed Compact or Archival Copy   Fair Credit Reporting Release Statement (FCR) (if applicable)   Authorization for Release of Medical Information (MEL) (if applicable)
Complete Package of Forms Received in HR on/:
e-QIP rejected by SPO:   Yes  No Rejected on:  Method of notification:  Phone  Mail
Rejected by OPM:   Yes No SPO notified on: // Method of notification: Phone Mail
Released on:/ Print Archival Copy
Personnel\Background Investigations\FORM eQIP account setup Updated on 3/30/2017 10:51 AM