



Background Investigation Approval Form (Levels 2-6)

Instructions: To be completed and signed by Administrative Officer or Authorized Representative. All new employees and contractors requesting an NIH ID Badge must bring this completed form to the Division of Personnel Security and Access Control, Building 31, Room 1B03.

Institute/Center: _____ Building/Office Location: _____

Common Account Number (CAN) to charge: _____

Applicant Name: _____
First
Middle
Last

Applicant Type: Employee Contractor Other

Please complete the information below appropriate for the applicant type

Employee

Title/Position and Current Grade: _____

Contractor

Company and Position/Title: _____

Other

Title and Current Grade (if applicable): _____

Company and Position/Title (if applicable): _____

<u>Level of investigation required (please check one)</u>	<u>Standard Rate</u>	<u>Priority Rate*</u>
ANACI (National Security / Level 2 Confidential)	<input type="checkbox"/> \$239	<input type="checkbox"/> \$281
SSBI (National Security / Level 3 & 4/ Top Secret)	<input type="checkbox"/> \$3,719	<input type="checkbox"/> \$4,085
NACIC (Public Trust/ Level 5a / Low Risk)	<input type="checkbox"/> \$124	None
MBI (Public Trust / Level 5b / Moderate Risk)	<input type="checkbox"/> \$558	<input type="checkbox"/> \$636
LBI (Public Trust / Level 5c / High Risk)	<input type="checkbox"/> \$2,465	<input type="checkbox"/> \$2,857
BI (Public Trust / Level 6 / High Risk)	<input type="checkbox"/> \$2,961	<input type="checkbox"/> \$3,510

*Approval for all priority service requests will require prior authorization from supervisor

AO / IC Representative (print) Authorized Signature Date

CAN Approval (if different than AO) CAN Approval Signature Date

** Approval for all priority service requests will require authorization from supervisor