

# E-QIP Users Processing Guide

Electronic Questionnaire for Investigations Processing

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# E-QIP

e-QIP - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address <http://www.opm.gov/e-qip/>

New User About the Agency What's New Quick Index Operating Status Search

Office of Personnel Management  
The Federal Government's Human Resources Agency

Strategic Management of Human Capital Employment and Benefits Career Opportunities

You are here: [Home](#) > [e-qip](#)

## e - QIP Gateway

### Electronic Questionnaires for Investigations Processing

- ↳ [Main](#)
- ↳ [e-QIP Applicant Site](#)
- ↳ [Frequently Asked Questions](#)
- ↳ [Quick Reference Guide for the Applicant](#)
- ↳ [Need Help?](#)

Welcome! This is your first step in the process of completing your security questionnaire and beginning your background investigation. This page provides information about the type of internet connection you need to use e-QIP, diagnostic tools for your computer, and other help topics. Please choose one of the options listed below. Thank you for visiting e-QIP!

Enter e-QIP Applicant Site

*Please note: Applicants can only access the e-QIP system if they have been invited to do so by an appropriate official at their sponsoring agency. Individuals cannot pre-apply for a security clearance, nor update their security questionnaire unless granted access by an appropriate agency official.*

**Resources for e-QIP Applicants**

- [Quick Reference Guide for e-QIP Applicants](#)
- [Frequently Asked Questions](#)
- [e-QIP Brochure for Applicants \(Version 1.07\)](#)

PDF version [675 KB]

Go to Portable Document Format (PDF) Help page

- Please go to [www.opm.gov/e-qip](http://www.opm.gov/e-qip)

Note: Site can be accessed from any computer (even at home)



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# E-QIP

e-QIP - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Refresh Home Search Favorites

Address http://www.opm.gov/e-qip/

New User About the Agency | What's New | Quick Index | Operating Status Search

**Office of Personnel Management**  
The Federal Government's Human Resources Agency

Strategic Management of Human Capital Employment and Benefits Career Opportunities

Working for America

You are here: [Home](#) > [e-qip](#)

**e - QIP Gateway**  
Electronic Questionnaires for Investigations Processing

↳ [Main](#)

↳ [e-QIP Applicant Site](#)

↳ [Frequently Asked Questions](#)

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PDF version [675 KB]

Go to [Portable Document Format \(PDF\) Help page](#)

Click on Enter e-QIP Applicant Site



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# E-QIP

**Testing Your Web Browser for Compatibility**

Before you continue, the e-QIP System must verify that you are using an approved web browser that is properly configured. If you need to make changes to your web browser's settings, click [Try Tests Again](#) to retest your configuration.

**Your Web Browser's Brand and Version**

We detected that you are using **Microsoft Internet Explorer**. The version number we detected is **6.0**.

**OK** - The e-QIP System **does support** this web browser.

**Your Web Browser's Cookie Acceptance**

**OK** - We detected that session cookies **are enabled** for your web browser.

**Your Web Browser's Scripting Settings**

**OK** - Your web browser **does allow** scripting.

**Proceed to the e-QIP System**

If you are ready to proceed, click "Continue."

**Note:** If your web browser **does not connect** to the e-QIP System after you click the "Continue" button above, follow these steps to verify that 128-bit encryption is installed and Transport Layer Security (TLS) 1.0 is enabled:

1. First, verify that your browser supports 128-bit "strong encryption" by selecting "Help" > "About Internet Explorer" from the web browser's menu. If "Cipher Strength: 128-bit" does not appear in the "About Internet Explorer" window then you will need to install the [Internet Explorer High Encryption Pack](#).
2. Next, check the TLS 1.0 setting by selecting "Tools" > "Internet Options" on the web browser's menu.
3. Select the tab labeled "Advanced."
4. Locate the section labeled "Security."
5. Locate the item in that section labeled "Use TLS 1.0." In Internet Explorer, this option is disabled by default. Check the box to enable TLS 1.0.
6. Click the "OK" button to save these changes.
7. When you finish these steps, click the "Continue" button to try again.

- Site will automatically conduct a browser check on the computer.
- Even If the 3 green **OK**'s are received, you probably will have to complete the **instructions** below.
- Note: Most computers must be changed.



# E-QIP

Login - Identify Yourself to the e-QIP System - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Refresh Home Search Favorites RSS Mail Print Phone Sync

Address <https://www.e-qip.opm.gov/eqipleQIP> Go Link

Help

Login Identify Yourself to the e-QIP System

OMB No. 3206-0005

The United States Government  
U.S. Office of Personnel Management (OPM)

Only persons specifically authorized to do so may access this data. Unauthorized attempts to pass this screen, as well as any use of data in this system for purposes other than those authorized by OPM, are a violation of federal law and/or regulation. Violators are subject to disciplinary action and prosecution.

Enter your Social Security number, then click the "Submit" button. Your input will be masked to protect your privacy.

Social Security Number

-  -

Submit Clear Fields

- Changes to a secure site (https)
- Enter **SSAN**
- Click **Submit**

# E-QIP

- If your information **was not** loaded prior or the wrong SSAN is entered, secondary **Golden Questions** appear.
- These questions will be random and fruitless.
- You will **not** get access!

Authentication - Answer your Golden Questions - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address <https://www.e-qip.com.gov/eqip/eQIP>

[Help - Return to Login Screen](#)

Authentication OMB No. 3206-0005

Answer your Golden Questions

**WARNING!**  
It is **YOUR RESPONSIBILITY** to protect the answers to your Golden Questions.

The answers to your Golden Questions serve as your password to the e-QIP system. The fields to enter your answers into are masked by default, but may be viewed in plaintext to allow you to more accurately enter your answers. Do not allow someone to see your computer screen while your answers are on the screen. If someone acquires your answers, they will be able to logon the e-QIP system under your identity, allowing them to see and change your personal data.

Enter the answer to each Golden Question.

Allow me to see my Golden Answers as I type them.

**Question/Answer #1**

Question: What is your favorite color?

Answer:

**Question/Answer #2**

Question: What is your favorite movie?

Answer:

**Question/Answer #3**

Question: How many brothers do you have?

Answer:

Note: If you entered your Social Security Number incorrectly, click "[Return to Login Screen](#)" to try again.



# E-QIP

Authentication - Answer your Golden Questions - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address <https://www.e-qip.opm.gov/eqip/eQIP>

[Help](#) - [Return to Login Screen](#)

**Authentication** OMB No. 3206-0005  
**Answer your Golden Questions**

**WARNING!**  
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The answers to your Golden Questions serve as your password to the e-QIP system. The fields to enter your answers into are masked by default, but may be viewed in plaintext to allow you to more accurately enter your answers. Do not allow someone to see your computer screen while your answers are on the screen. If someone acquires your answers, they will be able to logon the e-QIP system under your identity, allowing them to see and change your personal data.

If you suspect someone knows the answers to your Golden Questions, you should change your Golden Questions and Answers. If you check the "Let me change my Golden Questions and Answers" box, the next screen will allow you to change your Golden Questions and Answers.

Enter the answer to each Golden Question.

Allow me to see my Golden Answers as I type them.

**Question/Answer #1**  
Question: What is your LAST name?  
Answer:

**Question/Answer #2**  
Question: In what four-digit YEAR were you born?  
Answer:

**Question/Answer #3**  
Question: In what CITY were you born?  
Answer:

Let me change my Golden Questions and Answers.

Note: If you entered your Social Security Number incorrectly, click "[Return to Login Screen](#)" to try again.

- If the Subject was loaded and proper SSAN is entered, this screen appears.

- Golden questions will be:

1) LAST Name

2) YEAR of Birth

3) CITY of Birth





# E-QIP

Authentication  
Answer your Golden Questions

OMB No. 3206-0005

**WARNING!**  
It is YOUR RESPONSIBILITY to protect the answers to your Golden Questions.

The answers to your Golden Questions serve as your password to the e-QIP system. The fields to enter your answers into are masked by default, but may be viewed in plaintext to allow you to more accurately enter your answers. Do not allow someone to see your computer screen while your answers are on the screen. If someone acquires your answers, they will be able to logon the e-QIP system under your identity, allowing them to see and change your personal data.

If you suspect someone knows the answers to your Golden Questions, you should change your Golden Questions and Answers. If you check the "Let me change my Golden Questions and Answers" box, the next screen will allow you to change your Golden Questions and Answers.

Enter the answer to each Golden Question.

Allow me to see my Golden Answers as I type them.

**Question/Answer #1**  
Question: What is your LAST name?  
Answer: Petty

**Question/Answer #2**  
Question: In what four-digit YEAR were you born?  
Answer: 1965

**Question/Answer #3**  
Question: In what CITY were you born?  
Answer: unknown

- Click box to see typing
- Enter data requested
- During **initial** attempt, Subject **MUST** respond to What CITY were you born



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# E-QIP

- Successful log-in should show you this screen.
- It should be noted, full name or date of birth is not entered – just last name and year of birth.
- Click here to go to the next page.

Select Investigation Request · Choose the Task to Begin - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address: <https://www.e-qip.opm.gov/eqp/eQIP>

[Help](#) · [Logout](#)

## Select Investigation Request

OMB No. 3206-0005

Choose the Task to Begin

This is the identifying information we have on file for your Social Security Number. If any of this information is incorrect, contact the agency that initiated your Investigation Request.

Identifying Information	
Full Name	PETTY, JEFFR
Date of Birth	09/06/1965
Place of Birth	UNKNOWN,

### Complete an Investigation Request

The following screens will step you through the process for completing an Investigation Request. Click on the link below to begin or continue this process. If you have any questions or concerns, click the "Help" link for more information.

e-QIP Investigation Request #171724	
Form:	Questionnaire For National Security Positions (SF86)
Agency:	SON JPAS
Actions:	<a href="#">Enter Your Data</a> » Begin/Continue providing information for the forms associated with this Investigation Request.



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Welcome - Instructions for Editing Your Form Data - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites

Address: https://www.e-qip.opm.gov/eqip/eQIP?ScreenAction=Submit&NavigateToScreenID=FORM\_AUTOGEN&Request\_ID=1717248&VerifyIntegrity/WML=DLRZYRIZACED0005737200196A617661782E63727970746F2E5365616C66564

Help · Display · Logout      Navigation: Welcome      Go

**Welcome**      OMB No. 3206-0005

**Instructions for Editing Your Form Data**

**Read the following information before attempting to complete this form. You may refer back to this information at any time while editing your form data by clicking the "Help" link at the top of the screen.**

The Electronic Questionnaires for Investigations Processing (e-QIP) system allows you the ability to complete paperwork pertaining to a background investigation requested by your employing agency. The following screens will guide you through the tasks required to complete your investigation request.

The tasks you will complete are, as follows:

- Review the Form Instructions
- Enter Your Form Data
- Validate Your Data for Omissions and Errors
- Review Your Data for Completeness and Accuracy
- Certify Completeness and Accuracy of Your Investigation Request
- Print an Archival Copy of Your Certified Investigation Request
- Release Your Investigation Request to the Initiating Agency

Follow the instructions displayed on each screen very carefully. If you have any questions, contact the agency that initiated this investigation request.

**Navigation**

The e-QIP screens are fully navigable using the links and buttons provided on each web page e-QIP displays. Since changes to data on one screen may affect the display of data on another screen, e-QIP does not support using the Back or Forward function buttons of your web browser. Please refrain from using those buttons as doing so may result in loss of data you provide.

Use your mouse or keyboard to navigate the e-QIP screens. You may use the Tab key to move between links and other form controls. Press the Tab key once to move forward to the next link or control on the screen. Hold Shift and press the Tab key once to move backwards.

Clicking the Save or Continue button at the bottom of each screen will step you through the natural progression of each section of the form and completion tasks. At any time you may alternatively navigate to any other section or task. To do this, select the desired section or task from the Navigation select list at the top right corner of the screen, then click the Go button. Note that doing this will *not* save any changes you made on the currently displayed screen. See the Saving Your Data section below for more information about saving data. When in doubt, click Save first.

Use caution when using the Backspace key. The Backspace key will delete the character before the cursor when the cursor is in a text editing field. When focused on links and other controls such as check boxes and drop-down lists, the Backspace key will behave as the web browser's Back button. Pressing Backspace outside a text field may result in loss of data you provide.

# E-QIP

Read, scroll down, click **Continue**.



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# E-QIP

SF86 Sections 1-6: Your Identifying Information - Comprehensive Details - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address: <https://www.e-qip.opm.gov/eqip/eQIP?scripting=true>

Navigation: SF86 Sections 1-6: Your Identifying Information Go

OMB No. 3206-0005  
Form: SF86

Sections 1-6: Your Identifying Information  
Comprehensive Details

Provide the following information about your identity.

**Section 1: Full Name**

If you have no first name or middle name, select No First Name (NFN) or No Middle Name (NMN), as appropriate. If you have only initials in your name, enter the initial(s) (without the period) and select Initial Only (IO). If you are a "Jr.," "Sr.," "II," etc., enter this under Suffix.

Full Name	
Name	IO/NFN/NMN
Last: <input type="text"/>	<input type="text"/>
First: <input type="text"/>	<input type="text"/>
Middle: <input type="text"/>	<input type="text"/>
Suffix: <input type="text"/>	<input type="text"/>

**Section 2: Date of Birth**

Date of Birth

Month/Day/Year	Est.
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="checkbox"/>

**Section 3: Place of Birth**

Place of Birth

City: <input type="text"/>	County: <input type="text"/>
Provide Country if outside the United States; otherwise, provide State	
State: Nebraska (NE) <input type="text"/>	
Country: <input type="text"/>	

Enter requested data.

If locations are States within the US, no need to enter United States.



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# E-QIP

- Navigation located in upper right corner. Move from module to module.

Navigation: SF86 Sections 1-6: Your Identifying Information

Sections 1-6: Your Identifying Information  
Comprehensive Details

OMB No. 3206-0065  
Form: SF86

Provide the following information about your identity.

**Section 1: Full Name**

If you have no first name or middle name, select No First Name (NFN) or No Middle Name (NMN), as appropriate. If you have only initials in your name, enter the initial(s) (without the period) and select Initial Only (IO). If you are a "Jr.," "Sr.," "II," etc., enter this under Suffix.

Full Name	
Name	IO/NFN/NMN
Last: <input type="text"/>	<input type="text"/>
First: <input type="text"/>	<input type="text"/>
Middle: <input type="text"/>	<input type="text"/>
Suffix: <input type="text"/>	<input type="text"/>

**Section 2: Date of Birth**

Date of Birth

Month/Day/Year	Est.
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="checkbox"/>

**Section 3: Place of Birth**

Place of Birth

City: <input type="text"/>	County: <input type="text"/>
Provide Country if outside the United States; otherwise, provide State.	
State: Nebraska (NE)	<input type="text"/>
Country: <input type="text"/>	<input type="text"/>



SF86 Sections 1-6: Your Identifying Information - Comprehensive Details - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address: https://www.e-qip.opm.gov/eqip/eqIP?scripting=true

Navigation: SF86 Sections 1-6: Your Identifying Information

**Sections 1-6: Your Identifying Information**  
Comprehensive Details

Provide the following information about your identity.

**Section 1: Full Name**

If you have no first name or middle name, select No First Name (NFN) or No Middle Name (NMN), as initial(s) (without the period) and select Initial Only (IO). If you are a "Jr.," "Sr.," "II," etc., enter this in the Initial Only field.

Full Name	
Name	IO/NFN/NMN
Last: <input type="text"/>	<input type="text"/>
First: <input type="text"/>	<input type="text"/>
Middle: <input type="text"/>	<input type="text"/>
Suffix: <input type="text"/>	<input type="text"/>

**Section 2: Date of Birth**

Date of Birth

Month/Day/Year	Est.
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="checkbox"/>

**Section 3: Place of Birth**

Place of Birth

City: <input type="text"/>	County: <input type="text"/>
Provide Country if outside the United States; otherwise, provide State.	
State: Nebraska (NE)	<input type="text"/>
Country: <input type="text"/>	<input type="text"/>

Navigation menu items:

- E.O. 12968 Rider for the SF86
- SF86 Sections 1-6: Your Identifying Information
- SF86 Section 7: Telephone Numbers
- SF86 Section 8: Citizenship
- SF86 Section 9: Where You Have Lived
- SF86 Section 10: Where You Went To School
- SF86 Section 11: Your Employment Activities
- SF86 Section 12: People Who Know You Well
- SF86 Section 13/15: Your Spouse
- SF86 Section 14/15: Your Relatives and Associates
- SF86 Section 16: Your Military History
- SF86 Section 17: Your Foreign Activities
- SF86 Section 18: Foreign Countries You Have Visited
- SF86 Section 19: Your Military Record
- SF86 Section 20: Your Selective Service Record
- SF86 Section 21: Your Medical Record
- SF86 Section 22: Your Employment Record
- SF86 Section 23: Your Police Record
- SF86 Section 24: Your Use of Illegal Drugs and Drug Activity
- SF86 Section 25: Your Use of Alcohol
- SF86 Section 26: Your Investigations Record
- SF86 Section 27: Your Financial Record
- SF86 Section 28: Your Financial Delinquencies
- SF86 Section 29: Public Record Civil Court Actions
- SF86 Section 30: Your Association Record
- SF86 Additional Comments
- SF86 Certification That My Answers Are True
- Expected Attachments
- Supplemental Information
- Validate, Review, and Certify

# E-QIP

Pull-down menu for modules.



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SF86 Section 9: Where You Have Lived - Section Summary - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address: https://www.e-qip.opm.gov/eqip/eqIP?scripting=true

Navigation: SF86 Section 9: Where You Have Lived

Help Display Logout

### Section 9: Where You Have Lived

Section Summary

OMB No. 3206-0005  
Form: SF86

Provide a detailed entry for each place you have lived in the last 7 years. All periods must be accounted for in your list. Do not list a permanent address when you were actually living at a school address, etc. You may omit temporary military duty locations under 90 days (list your permanent address instead).

#### Summary of Where You Have Lived

#	Time Period	Street	City
<input type="button" value="Add an Entry"/>			

#### Additional Comments

Note: If you need to provide any additional comments about this information, enter them below.

# E-QIP

Sub-pages within modules.



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SFB6 Section 11: Your Employment Activities - Entry Details - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address: https://www.e-qip.opm.gov/eqip/eQIP?scripting=true

Navigation: SFB6 Section 11: Your Employment Activities Go

Help · Display · Logout

**Section 11: Your Employment Activities**  
Entry Details

OMB No. 3206-0005  
Form: SFB6

**Dates of Activity**

Date	Month/Year	Est./Pres.
From:	Sep(09) / 1995	
To:		Present

**Type of Employment**  
Other Federal employment

**Employer Name**  
22 Mission Support Group, USAF

**Your Position Title**  
Executive Secretary

**Employer's Street Address**

Street:	57837 Coffeyville St, Ste 204		
City:	McConnell AFB		
Provide Country if outside the United States; otherwise, provide State and Zip Code.			
State:	Kansas (KS)	Zip Code:	67221
Country:	<a href="#">(List)</a>		

**Employer's Telephone Number**

# E-QIP

Uses Month / Years and allows for estimated dates.



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SF86 Section 12: People Who Know You Well - Section Summary - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address: https://www.e-qip.opm.gov/eqip/eQIP?scripting=true

Navigation: SF86 Section 12: People Who Know You Well

Section 12: People Who Know You Well  
Section Summary

OMB No. 3208-0088  
Form: SF86

**Validation Results**

Type	Message
Warning	<p>Provide three people who know you well.</p> <p><input type="checkbox"/> I do not know the requested information. (Note: If you check the box above, then you must also explain below.)</p> <p><b>Explain</b></p> <p><input type="text"/></p>

Note: This message indicates problems with the information submitted. Messages labeled "Error" must be corrected. Messages labeled "Warning" must be corrected or explained. Make the changes indicated and click "Save" to revalidate. Click "Save/Continue" if you want to make these changes later.

List three people who know you well and live in the United States. They should be good friends, peers, colleagues, college roommates, etc., whose combined association with you covers as well as possible the last 7 years. Do not list your spouse, former spouses, or other relatives, and try not to list anyone who is listed elsewhere on this form.

**Summary of People Who Know You Well**

#	Time Period	Reference Name	Actions
1	From 09/1974 To Present	Reed, Jeanetta MNU	<input type="button" value="Edit"/> <input type="button" value="Delete"/>

**Additional Comments**

Note: If you need to provide any additional comments about this information, enter them below.

# E-QIP

Immediate validation (as you go) – Will give you a warning to inform you the module appears incomplete.



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# E-QIP

Validate, Review, and Certify - Validate Your Data - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address: https://www.e-qip.opm.gov/eqip/eQIP?scripting=true

Navigation: Validate, Review, and Certify

## Validate, Review, and Certify

Validate Your Data

OMB No. 3206-0005

Below are the results of validating your data.

Validation found errors or unsatisfied warnings in the information you provided. Use the Navigation menu above to return to the appropriate sections to make corrections.

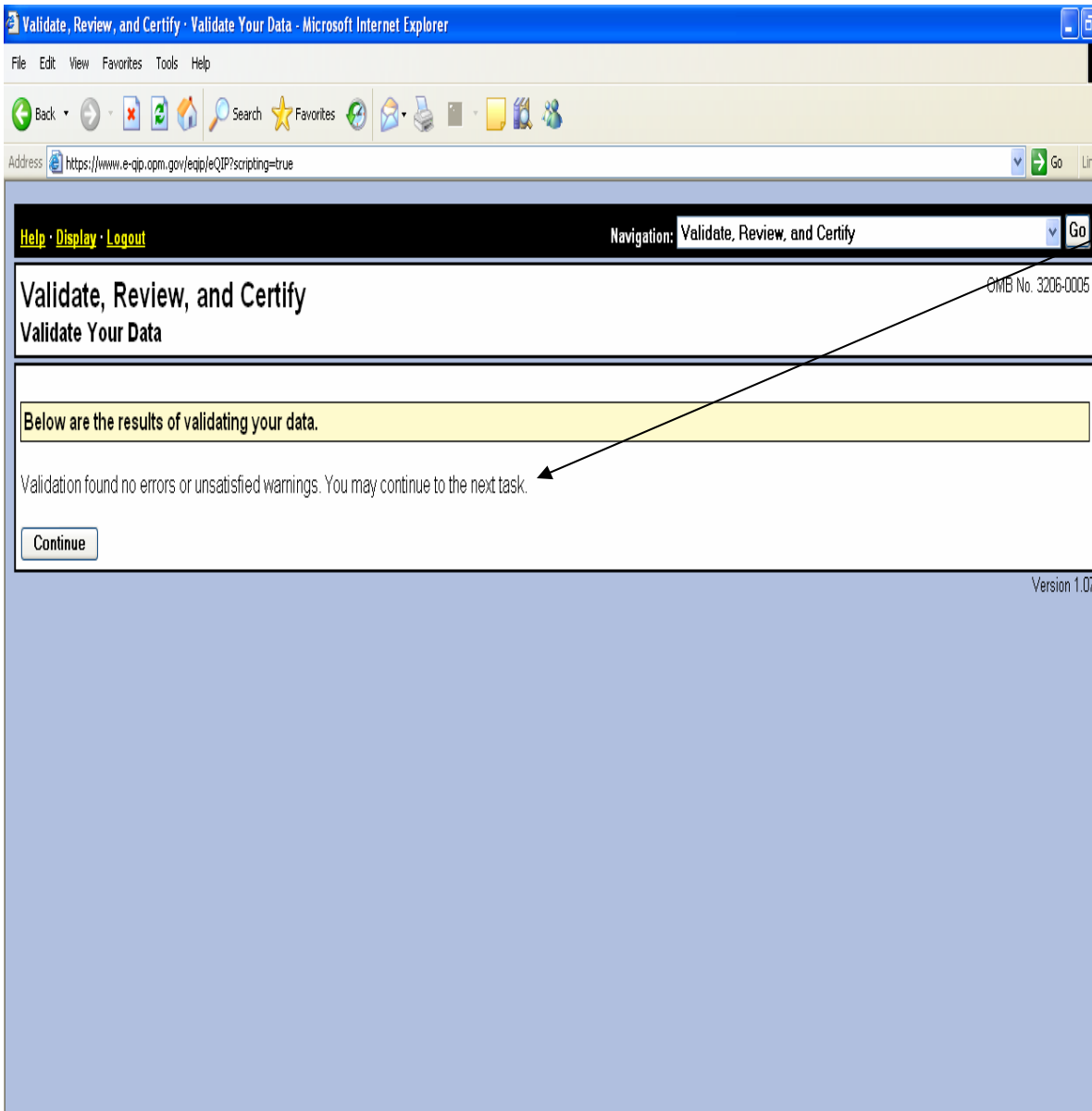
Validation Summary	
Type	Message
<b>Section 7: Telephone Numbers</b>	
Warning	Provide one or more valid telephone numbers.
<b>Section 8: Citizenship</b>	
Error	Mark the box that reflects your current citizenship status.
Warning	Provide a response for Mother's Maiden Name.
<b>Section 9: Where You Have Lived</b>	
Error	Provide a response for this item.
<b>Section 10: Where You Went To School</b>	
Error	Provide a response for this item.
<b>Section 11: Your Employment Activities</b>	
Error	Provide a response for this item.
<b>Section 12: People Who Know You Well</b>	
Warning	Provide three people who know you well.
<b>Section 13/15: Your Spouse</b>	
Error	Select your Marital Status from the given list.
<b>Section 14/15: Your Relatives and Associates</b>	
Error	Provide a response for this item.
<b>Section 16: Your Military History</b>	
Error	Answer the 'United States military service' (a) question yes or no.
Error	Answer the 'United States Merchant Marine service' (b) question yes or no.
Error	Provide a response for Summary of Your Military History.

- (Skipping to the end)
- Validate, Review, and Certify (similar to EPSQ)
- This one has errors.



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E-QIP

Successful validation.



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# E-QIP

- Click **Display** if you need a working copy (above, in yellow)

Validate, Review, and Certify - Review Your Data

File Edit View Favorites Tools Help

Address: https://www.e-qip.opm.gov/eqip/eQIP?scripting=true

Help · **Display** · Logout

Navigation: Validate, Review, and Certify Go

Validate, Review, and Certify  
Review Your Data

OMB No. 3206-0005

Click the "Display" link above to open a printable working copy of the data you provided. If you displayed your data before, be sure to close all other working copies you have open to ensure that you are reviewing the current copy. Review the information you provided for completeness and accuracy. If you are ready to certify the data you provided, click the Continue button to advance to the next screen. If you need to make changes, use the Navigation menu above to return to the appropriate sections to make changes.

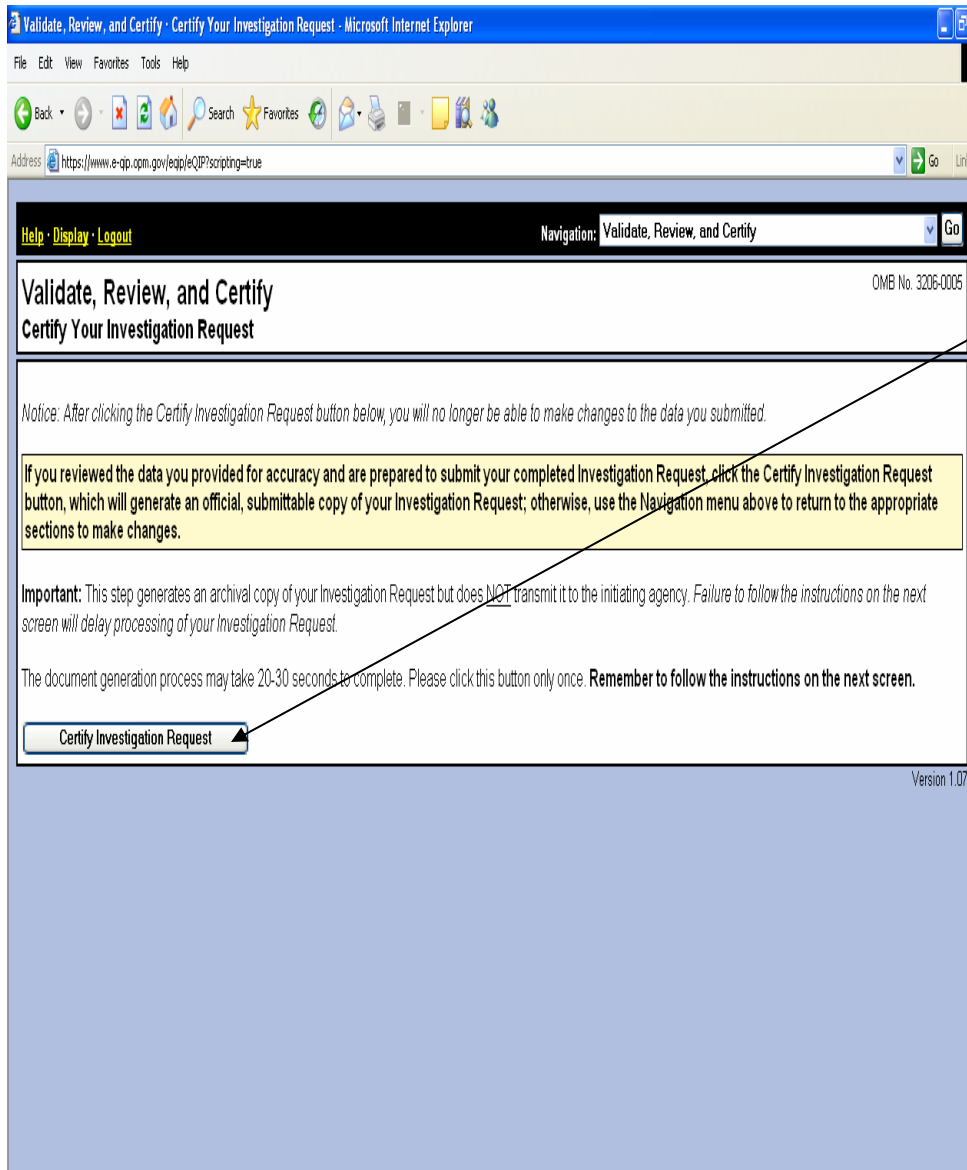
Continue

Version 1.07



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# E-QIP

- Once you click Certify, you will be locked out.
- To unlock, contact Gary White at 3-9546.



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# Creating an E-QIP Archives

Release Investigation Request - Print Signature Forms and Release for Processing - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address <https://www.e-qip.opm.gov/eqip/eQIP?scripting=true>

[Help](#) · [Return to Menu](#) · [Logout](#)

**Release Investigation Request** OMB No. 3206-0005  
**Print Signature Forms and Release for Processing**

**NOT COMPLETING THESE TASKS WILL DELAY PROCESSING OF YOUR INVESTIGATION REQUEST**

Carefully follow the instructions provided below in the order displayed. If you are unable to complete any of the steps at this time (e.g. if you do not have access to a printer at your computer), click "Logout" above to end this session. You may return to e-QIP at a later time to complete the remaining steps.

**Submitted Request**

Successfully certified request.

After you certified the completeness and accuracy of the information in your Investigation Request, e-QIP generated a printable archival copy of the information you provided. You are strongly advised to print a copy for your records. Properly dispose of any working copies that you may have printed while editing and reviewing your information, as those are not considered official. You will need Adobe Acrobat Reader or Adobe Acrobat to view the archival copy. Click the "Help" link for more information.

**Step One**

Click this link to display the archival copy, then print a copy to retain for your records.

[Display the Archival Copy of this Investigation Request for Printing](#)

Next you must print a copy of the signature form(s). The requesting agency must receive the signed form(s) to begin processing your Investigation Request. Print, sign, and submit the form(s) according to the instructions you have been provided. Print to only one side of each sheet of paper. Ensure that the text on the printed copy is legible and that all pages print. The printed text may not contain gaps, extraneous lines, or other errors caused by printer problems. Click the "Help" link for more information.

**Step Two**

Click this link to display the signature form(s), then print a copy, sign, and submit the form(s) to the office requesting your investigation.

[Display the Signature Form\(s\) for Printing](#)

When you have completed the steps listed above, you may release your Investigation Request for processing. Performing this step will electronically transmit your Investigation Request to the agency requesting your investigation, and you will no longer have online access to it for printing or review.

● Step 1: Subject can create an archival copy, if desired.

● Step 2: Subject must print all 3 signature pages, then provide original ink signatures to Safeguards & Security POC.



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# Signature Pages

## AUTHORIZATION FOR RELEASE OF INFORMATION

Carefully read this authorization to release information about you, then sign and date it in ink.

I **Authorize** any investigator, special agent, or other duly accredited representative of the authorized Federal agency conducting my background investigation, to obtain any information relating to my activities from individuals, schools, residential management agents, employers, criminal justice agencies, credit bureaus, consumer reporting agencies, collection agencies, retail business establishments, or other sources of information. This information may include, but is not limited to, my academic, residential, achievement, performance, attendance, disciplinary, employment history, criminal history record information, and financial and credit information. I authorize the Federal agency conducting my investigation to disclose the record of my background investigation to the requesting agency for the purpose of making a determination of suitability or eligibility for a security clearance.

I **Understand** that, for financial or lending institutions, medical institutions, hospitals, health care professionals, and other sources of information, a separate specific release will be needed, and I may be contacted for such a release at a later date. Where a separate release is requested for information relating to mental health treatment or counseling, the release will contain a list of the specific questions, relevant to the job description, which the doctor or therapist will be asked.

I **Further Authorize** any investigator, special agent, or other duly accredited representative of the U.S. Office of Personnel Management, the Federal Bureau of Investigation, the Department of Defense, the Defense Investigative Service, and any other authorized Federal agency, to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for access to classified information and/or for assignment to, or retention in a sensitive National Security position, in accordance with 5 U.S.C. 9101. I understand that I may request a copy of such records as may be available to me under the law.

I **Authorize** custodians of records and sources of information pertaining to me to release such information upon request of the investigator, special agent, or other duly accredited representative of any Federal agency authorized above regardless of any previous agreement to the contrary.

I **Understand** that the information released by records custodians and sources of information is for official use by the Federal Government only for the purposes provided in this Standard Form 86, and that it may be redisclosed by the Government only as authorized by law.

Copies of this authorization that show my signature are as valid as the original release signed by me. This authorization is valid for five (5) years from the date signed or upon the termination of my affiliation with the Federal Government, whichever is sooner. Read, sign and date the release on the next page if you answered "Yes" to question 21.

Signature (Sign in ink)	Full Name (Type or Print Legibly)	Date Signed
Other Names Used		Social Security Number
Current Address (Street, City)	State	Zip Code
		Home Telephone Number (Include Area Code)
		( )

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If information handwritten on all signature pages is not legible, OPM will reject them. **This is a common rejection cause.**

Make note of Investigation Request number at bottom. Addressed later.



Safeguards & Security Division



# E-QIP

Scroll down for step 3.  
Subject must click  
**Release**  
**Request/Transmit to**  
**Agency**

Release Investigation Request - Print Signature Forms and Release for Processing - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address <https://www.e-qip.opm.gov/eqip/eQIP?scripting=true>

Carefully follow the instructions provided below in the order displayed. If you are unable to complete any of the steps at this time (e.g. if you do not have access to a printer at your computer), click "Logout" above to end this session. You may return to e-QIP at a later time to complete the remaining steps.

**Submitted Request**

Successfully certified request.

After you certified the completeness and accuracy of the information in your Investigation Request, e-QIP generated a printable archival copy of the information you provided. You are strongly advised to print a copy for your records. Properly dispose of any working copies that you may have printed while editing and reviewing your information, as those are not considered official. You will need Adobe Acrobat Reader or Adobe Acrobat to view the archival copy. Click the "Help" link for more information.

**Step One**

Click this link to display the archival copy, then print a copy to retain for your records.

[Display the Archival Copy of this Investigation Request for Printing](#)

Next you must print a copy of the signature form(s). The requesting agency must receive the signed form(s) to begin processing your Investigation Request. Print, sign, and submit the form(s) according to the instructions you have been provided. Print to only one side of each sheet of paper. Ensure that the text on the printed copy is legible and that all pages print. The printed text may not contain gaps, extraneous lines, or other errors caused by printer problems. Click the "Help" link for more information.

**Step Two**

Click this link to display the signature form(s), then print a copy, sign, and submit the form(s) to the office requesting your investigation.

[Display the Signature Form\(s\) for Printing](#)

When you have completed the steps listed above, you may release your Investigation Request for processing. Performing this step will electronically transmit your Investigation Request to the agency requesting your investigation, and you will no longer have online access to it for printing or review.

**Step Three**

After you complete the previous step, click this link to release and transmit your Investigation Request to the requesting agency.

[Release Request/Transmit to Agency](#)

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# E-QIP

- Successful completion of E-QIP!
- Any further questions or concerns can be directed to:

**Gary White**  
**GTN 3-9546**

**Gary.white@science.doe.gov**

Farewell · Thank You For Using the e-QIP System - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Refresh Print Mail Stop

Address <https://www.e-qip.opm.gov/eqip/eQIP?ScreenAction=ApplicantReallyReleaseForm&VerifyIntegrity/XML=5VKDLYNACED0005737200196A617661782E63727970746F2E5365616C65644F626A6563743E363D46C387547002000> Go Link

[Help Us Improve e-QIP](#)

**Farewell** OMB No. 3208-0005

**Thank You For Using the e-QIP System**

**Session Closed**

You are logged out of the system.

**Submitted Investigation Request**

Released Investigation Request for processing.

Your Investigation Request has been released for processing. This completes the online portion of your submission. Please remember to sign and submit the signature forms to the office that requested your investigation.

Thank you for completing your form using the e-QIP system. If you are willing, please take a moment to answer a few questions regarding this experience to help us improve this process by following [this link](#).

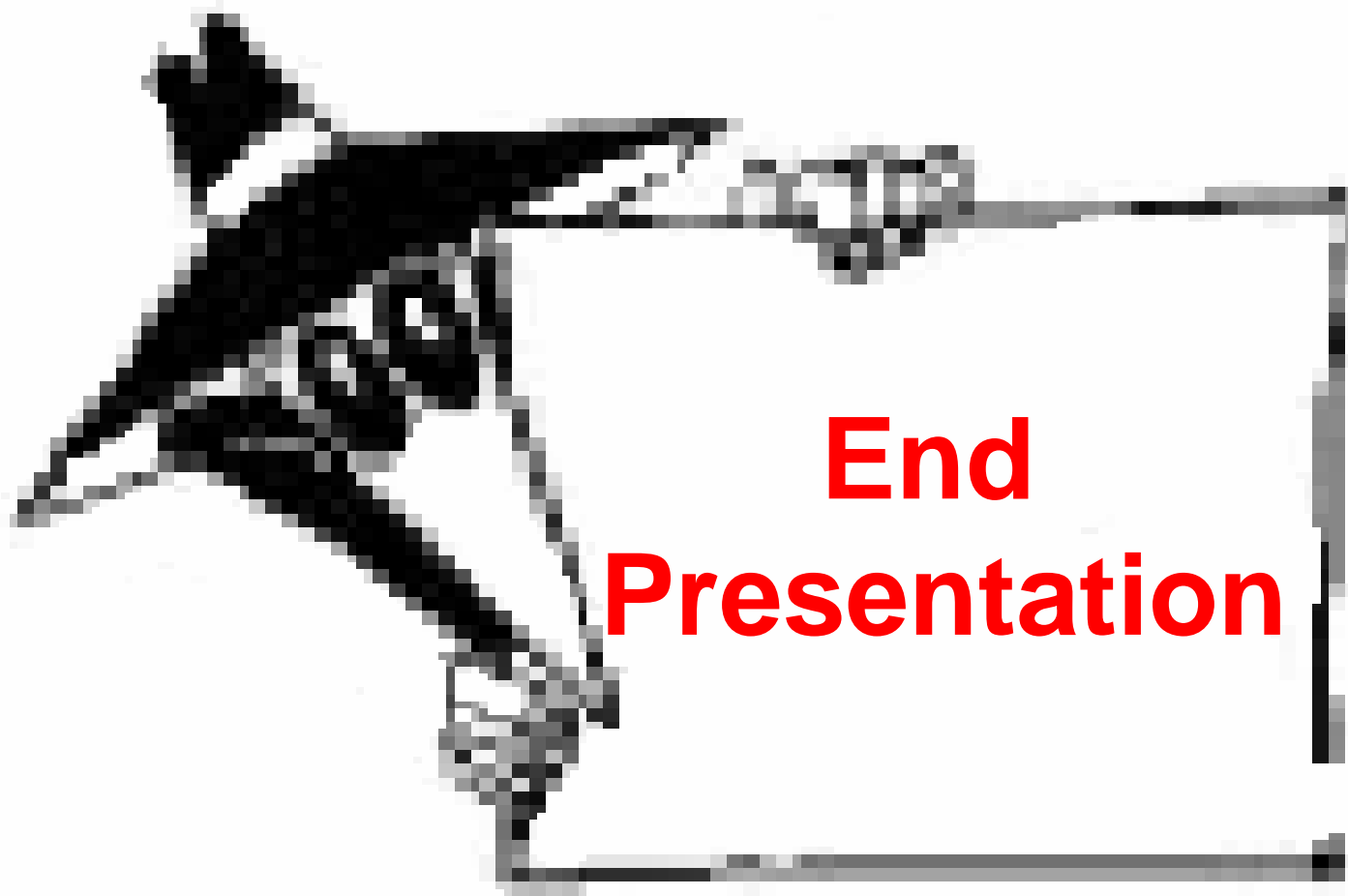
For your privacy, close this window when you finish.

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## Electronic Questionnaire for Investigations Processing



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