

This form is to be attached to each Electronic Personnel Security Questionnaire (EPSQ) submitted to OPM for investigation. Note: *The EPSQ is for internal DOD use only, and is pending OMB approval.*

Agency Use Information (SF 85P)

A Type of Investigation	B Extra Coverage	C Sensitivity/Risk Level	D Compt/ADP	E Nature of Action Code	F Date of Action Month Day Year
G Geographic Location		H Position Code	I Position Title		
J SON	K Location of Official Personnel Folder	None	Other Address		Zip Code
		NPRC			
		At SON			
L SOI	M Location of Security Folder	None	Other Address		Zip Code
		At SOI			
		NPI			
N OPAC-ALC Number		O Accounting Data and/or Agency Case Number			
P Requesting Official	Name and Title	Signature		Telephone Number ()	Date

The following information is requested as part of your EPSQ for an investigative request being sent to OPM. This information will be used to obtain records in order to determine your suitability for employment. Please sign the attached sheet certifying the accuracy of the information you provided.

Subject of Investigation (Identifying Information)

FULL NAME			
* If you have only initials in your name, use them and state (IO)		* If you are a "JR.", "SR", "II", etc., enter this in the box after your middle name	
* If you have no middle name, enter "NMN"			
Last Name	First Name	Middle Name	Jr., II, etc.
OTHER NAMES USED			
Give other names you used and the period of time you used them (for example: your maiden name, name(s) by a former marriage, former names(s), alias(es), or nickname(s). If the other name is your maiden name, put "nee" in front of it.			
Name # 1	Month/Year To	Name # 3	Month/Year To
Name # 2	Month/Year To	Name # 4	Month/Year To

EDUCATION DEGREE(S) (OUTSIDE 7 YEARS)

OPM verifies highest degree obtained and degrees pertinent to the position for which this investigation is conducted. Please list education information below for those degrees beyond the 7 year period, not listed on your EPSQ. Use the number "2" in the Code block which represents College/University/Military College.

Month/Year #1 To	Code	Name of School	Degree/Diploma/Other	Month/Year Awarded
Street Address and City (County) of School			State	Zip Code
Month/Year #2 To	Code	Name of School	Degree/Diploma/Other	Month/Year Awarded
Street Address and City (County) of School			State	Zip Code

Appointee/Applicant Signature:

Date:

September 1999

Instructions for Completing the SF-85P “Agency Use” Block

A Type of Investigation			
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Enter the appropriate 3-character code from the chart below which represents the type of investigation and service requested. The first two digits represent the investigation type, and the third digit represents the investigation service.

Type of Investigation	35 Day Service	75 Day Service	120 Day Service	Reopen Service	150 Day Service	180 Day Service
SSBI		30B	30C	30D		
SSBI-PR				18D		18F
NACI		02B		02D		
NAC	06A					

*Note: Any variation to the service noted above should be made by special request to OPM.

SSBI: Single Scope Background Investigation
 SSBI-PR: Periodic Reinvestigation for Single Scope Background Investigation
 NACI: National Agency Check with Inquiries
 NAC: National Agency Check

B Extra Coverage																		
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Enter the appropriate number of the numeric (1-7) and/or alphabetic (A-Z) codes from the chart below which represent the type of extra investigative coverage desired.

Chart codes:
 O = Optional Coverage
 S = Standard Coverage
 N/A = Not Available

Type of Investigation	<i>Extra Coverage Codes</i>											
	1 Overseas	2 Credit	3 Advance NAC	4 Mgr/Spvy	5 Public Contact	6 Law Enforcement	7 Attachments	H INS	I Spouse INS	L BVS	R Reinvestigation	Z Criminal Justice Position
SSBI	N/A	S	O	O	O	O	O	S	O	O	O	O
SSBI-PR	N/A	S	O	O	O	O	O	S	O	O	O	O
NACI	N/A	S	O	N/A	N/A	N/A	O	O	O	O	O	O
NAC	N/A	O	O	N/A	N/A	N/A	O	O	O	O	O	O

Code 1 (Overseas--Subject and Spouse): Not available

Code 2 (Credit): Automated scheduling of Credit, if needed for the NAC, place code 2 in the extra coverage block.

Code 3 (Advance NAC): The Advance on the National Agency Checks (NAC) consists of an itemized list of the NAC results and or search status. This is notification of item results only, no hardcopy furnished. The Advance NAC Report is sent to the SOI and is available for all case types. If after 30 days from the scheduling date, the NAC(s) are not complete, a NAC Status report will be generated to provide the SOI information on the required NAC items. Place code “3” in Block “B” for this coverage. For more information and sample copies of the reports, contact OPM-FIPC.

Code 4 (Managerial and Supervisory)
Code 5 (Public Contact)
Code 6 (Law Enforcement)

These codes print instructions to the investigators on the Case Assignment Transmittal (CAT) to provide additional coverage for positions requiring these duties. The extra coverage is specified in the Extra Coverage Section of the Investigator's Handbook. An additional \$100 surcharge is added to the case cost for this coverage. Place extra coverage code of "4, 5, or 6" in Block B for this coverage.

Code 7 (Attachments): When information is attached to the investigative request, such as:
 Request for license or certificate verification
 Issue(s) information
 Personnel folder or security file information
 Special handling instructions
 Any other information pertinent to the investigation

Place code "7" in Block B to indicate an attachment to the investigation.

Code H (INS): Automated scheduling of the Immigration and Naturalization Search. Place code "H" in Block B for this coverage.

Code I (Spouse INS): Automated scheduling of the Immigration and Naturalization Search for the subject of investigations' spouse. Place code "I" in Block B to request this coverage.

Code L (BVS): Automated scheduling of the Birth Verification at State BVS. Place code "L" in Block B to request this coverage.

Code R (Reinvestigation): This code by-passes the administrative edits resident in PIPS that requires the appropriate level of case type/sensitivity/access. Place code "R" in Block B to indicate a reinvestigation.

Code Z (Criminal Justice Position): This identifies a Criminal Justice Position that are exempt from the FBI user fees. Place code "Z" in Block B if the subject is in a Criminal Justice Position.

SF 85P	C	
	Sensitivity/Risk Level	

Enter one of the following codes representing the Sensitivity/Risk level of the position requiring the investigation:

CODE	LEVEL
2	Noncritical-Sensitive
3	Critical-Sensitive
4	Special-Sensitive
5	Moderate Risk
6	High Risk

SF 85P	D	
	Compu/ADP	

Enter "C" in this block if investigation is for an ADP-Computer position. If not an ADP-Computer position, leave the block blank.

E	Nature of			
	Action Code			

If the person being investigated is a Federal employee or applicant, enter the 3 digit code showing the Nature of Action taken or to be taken for the position requiring the investigation (the same action code as used on the SF-52). If your agency did not use FPM Supplement 296-33 coding, enter "000". If the person being investigated is a contract employee, enter "CON".

F	Date of	Month	Day	Year
	Action			

Enter the effective date (Month/Day/Year) of the action requiring the investigation. If the action has not been taken, leave the block blank.

G Geographic Location									

enter the 9-digit "Worldwide Geographic Location Code", showing the actual location of the duty station for the position. The Geographic Location Code is an OPM Central Personnel Data File (CPDF) requirement that must be entered on the SF-52 and SF-50 for certain personnel actions. This is a GSA Publication (4/87). *If unknown, leave the block blank.*

H Position Code	

Enter the appropriate alphabetic code from the chart below. *If none of the codes apply, leave the block blank.*

<u>CODE</u>	<u>POSITION</u>	<u>CODE</u>	<u>POSITION</u>
A	Congressional Staff	E	White House
B	Investigator	F	SES/15 (or equivalent)
C	Astronaut	G	Special/Confidential Assistants
D	Fellow Programs		(GS/13 and above)
		H	Child Care Provider

I Position Title	

Enter the title of the position for which the investigation is being requested. If the person being investigated is a contractor employee, enter the person's position with the contractor company, or "CON".

J SON				

Enter the 4 character Submitting Office Number (SON); if the Security Office is the Submitting Office, enter the Security Office Identifier (SOI) code.

K Location of Official Personnel Folder	<input type="checkbox"/>	None	Other Address	Zip Code				
	<input type="checkbox"/>	NPRC						
	<input type="checkbox"/>	At SON						

Check the correct box that gives us the location of the OPF.

- NONE:** If the person has never been a Federal employee
- NPRC:** If the OPF is at the National Personnel Records Center
- AT SON:** If the OPF is at the Submitting Office
- OTHER ADDRESS:** If the OPF is at any other location (for example, the SOI), furnish the address.

L SOI				

Enter the 4 character Security Office Identifier (SOI). Submitting Offices should contact their Security Office to determine the correct SOI.

