



**Transportation  
Security  
Administration**

*Federal Air Marshal Service*

**Armed Security Officer (ASO) Nomination Form**

Once both the Applicant and Nominating Entity Sections are completed, FAX FORM TO: 703-487-3025

***To Be Completed by ASO Applicant***

ASO Applicant Name: \_\_\_\_\_

Home Telephone: \_\_\_\_\_

Work Telephone: \_\_\_\_\_

Alternate Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_

St: \_\_\_\_\_

Zip: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

***To Be Completed by the Nominating Entity***

Nominating Entity:  
(Check Appropriate  
Operation)

Fixed Based  
Operator

Aircraft  
Operator

Company Name: \_\_\_\_\_

Point of Contact: \_\_\_\_\_

(First, Middle, Last)

Address: \_\_\_\_\_

City: \_\_\_\_\_

St. \_\_\_\_\_

Zip: \_\_\_\_\_

Home Telephone: \_\_\_\_\_

Work Telephone: \_\_\_\_\_

Alternate Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Upon Qualification, I request to be added to the list of qualified ASOs that may be provided to FBOs, aircraft operators, and security companies that require the list.**

**(Signature):** \_\_\_\_\_

I have spoken with the applicant, whose name appears on the form, and will nominate this individual to undergo TSA vetting and participation in the Armed Security Officer program for GA operations into Reagan National Airport.

**Nominating Entity Point of Contact**                      **Print Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_                      **Date:** \_\_\_\_\_

***FOR OFFICIAL USE ONLY***

Date Cleared by TSA: _____	TSA Official's Initials: _____
Comments:	

***PRIVACY ACT (e) (3) NOTICE***

**AUTHORITY:** 49 U.S.C. § 114; Pub. L.108-176. **PRINCIPAL PURPOSES(S):** To identify individuals eligible to serve as armed security officers aboard general aviation flights into DCA. **ROUTINE USE(S):** This information you provide may be shared with aircraft and airport operators, and the FAA, or for routine uses identified in TSA system of records, DHS/TSA 002, Transportation Security Threat Assessment System. **DISCLOSURE:** Voluntary; failure to furnish the requested information may result in delays in processing or denial of your nomination.

***PAPERWORK REDUCTION ACT BURDEN STATEMENT***

This is a mandatory collection of information if you wish to serve as an armed security officer onboard a flight to or from Ronald Reagan National Airport (DCA) in Washington, D.C. The total average burden per response associated with this collection is estimated to be approximately 20 minutes. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The control number assigned to this collection is OMB 1652-0035.

