


Document: IDAPP-A	Number: 2	Issue date: 10-01-2010	Revision #: 5	Revision date: 09-13-2011
 <p>Users Office, International Services Fermilab, Wilson Hall 1W, MS 103, PO Box 500, Pine St. & Kirk Rd., Batavia, IL 60510-5011 (Fax) 1-630-840-3688 (phone) 630-840-3811 / 3111 (Email) usersoffice@fnal.gov</p>	ID:	Action:	Validation Exp:	
	Insurance:	Medical:	Safety:	
	Computer:	Stkrn:	Family:	
	Non-437:	Sensitive:	Verifier:	Date:

Application for FIRST-TIME Fermilab Visitor ID Badge

INSTRUCTIONS
<input type="checkbox"/> Complete Parts 1 - 4 of the Application. <input type="checkbox"/> Review Fermilab's ES&H training and pass the ES&H test. <input type="checkbox"/> Sign Part 5. <input type="checkbox"/> Apply in person with the signed Application at the User's Office (WH1W). Bring with you: <ul style="list-style-type: none"> <input type="checkbox"/> proof of medical insurance (see Part 3), <input type="checkbox"/> an unexpired, government-issued, photo document confirming your identity <input type="checkbox"/> for non-U.S. citizens: your ORIGINAL unexpired passport, Driver's License, U.S. visa, I-94 Card
<p>Applicants who do NOT have computing privileges yet, but want them, ALSO must: <input type="checkbox"/> review the Fermilab Computer Security Policy, <input type="checkbox"/> sign in Part 6, and then <input type="checkbox"/> have a spokesperson or Division Head validate the request by signing below the Applicant's signature in Part 6.</p>

PART 1 – PERSONAL INFORMATION				
YOUR NAME	Last	First	Middle	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
FERMI LAB COMPUTING	Do you have Computing Privileges <u>now</u> ? <input type="checkbox"/> Yes <input type="checkbox"/> No		Fermilab ID Number (if known):	
YOUR LOCATION	<u>Your</u> Fermilab Office Location	<u>Your</u> Fermilab Mail Stop	<u>Your</u> Fermilab Phone Extension	
YOUR CONTACT INFO	<u>Your</u> Fermilab Email <i>@fnal.gov</i>	<u>Your</u> Email at your Home Institution	<u>Your</u> Other Email	
DRIVER'S LICENSE	Driver's License No.	Expiration Date (month/day/year)	State/Country of Issuance	
CURRENT LOCAL RESIDENCE	Street Address and Apartment #	City	State IL	Zip Code
GENERAL INFO	End Date of <u>this</u> Visit to the U.S.A. month / day / year	Is Family accompanying you now? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, go to Key&ID, Wilson Hall, Ground Floor for Authorized Guest badges)		
	BIRTH	Birthdate (month/day/year)	City of Birth	Country of Birth
CITIZENSHIP	Current Citizenship <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Other: (list all countries in which citizenship is held)			
COMPLETE ONLY IF A NON-U.S. CITIZEN	U.S. VISA STATUS	Visa Type/Class (handwritten on I-94) <input type="checkbox"/> A-2 <input type="checkbox"/> B-1 <input type="checkbox"/> J-1 <input type="checkbox"/> O-1 <input type="checkbox"/> TN <input type="checkbox"/> Greencard / LPR <input type="checkbox"/> F-1 <input type="checkbox"/> WB <input type="checkbox"/> J-2 <input type="checkbox"/> H-1B <input type="checkbox"/> Other:		<i>Visa Holders Only</i> Date of U.S. Arrival: (month/day/year)
	GREENCARD HOLDERS	Date of Issuance: (month/day/year)	Expiration Date: (month/day/year)	
	PASSPORT	Passport Number	Country of Issue	Expiration Date

PART 2 - MEDICAL INSURANCE	
<p>MEDICAL INSURANCE – Users must provide evidence that they have medical insurance that provides for medical treatment for both emergency and non-emergency illnesses and injuries, and extends to incidents occurring AT Fermilab, in Batavia, IL. If you do not have valid U.S. medical insurance that would cover you while at Fermilab, you must purchase such medical insurance before ID Badge issuance. See www.fnal.gov/pub/forphysicsts/users.</p>	
For J Visa Holders <u>Only</u>	<input type="checkbox"/> My J visa is sponsored by Fermilab (Fermi Research Alliance, LLC, or Universities Research Association, Inc.) <input type="checkbox"/> My J visa is NOT sponsored by Fermilab
Medical Insurance	<input type="checkbox"/> I have provided a current copy of a Declaration of Medical Insurance Coverage, Insurance Card, or other document to the Users Office. <input type="checkbox"/> I have not provided current documentation to the Users Office. Information about my medical insurance is below: <i>Name of Insurance Company (in English):</i> _____ <i>Name of Insurance Company (in your native alphabet, if appropriate):</i> _____ <i>Country of Insurance Company:</i> _____ <i>Policy #:</i> _____ <i>Effective Date of Insurance:</i> _____ <i>End Date of Insurance:</i> _____
<p>U.S. medical care is expensive without medical insurance. Examples of cost of care include: ❖ Examination by a physician at a doctor's office: \$250 - \$350. ❖ Examination by a physician at a hospital: \$350 - \$500. ❖ X-rays and other diagnostic imaging or tests: \$350 - \$500.</p>	

PRIVACY NOTICE

Fermi National Accelerator Laboratory ("Fermilab") is managed by the Fermi Research Alliance, LLC (FRA) under contract with the U.S. Department of Energy (DOE). The DOE requires that all users and visitors to Fermilab present information and/or documentation relating to identity and/or citizenship status. The provision of the requested information/documents is voluntary; however, failure to comply may result in denial of an ID badge. Information/documentation provided by non-US citizens is entered into a DOE database. All Users' Office files, including any information and copies of any documentation provided during an ID badge application, may be reviewed by DOE and other federal agencies at any time, without notice or any other explicit permission.

PART 3 - EMERGENCY CONTACT INFORMATION				
CONTACT PERSON FOR EMERGENCIES	Name	Relationship to You	<i>Please indicate the best way to contact this person</i>	<input type="checkbox"/> Email
		<input type="checkbox"/> Address		<input type="checkbox"/> Telephone
TRANSPORTATION FOR MEDICAL CARE	Do you, or will you, have a car at Fermilab? <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>If you are hurt on site, who could transport you to a facility for medical or other examination or care?</i>		
		Name:	Telephone:	
		Email:	Alt. Telephone:	

PART 4 – PROFESSIONAL CONTACT INFORMATION				
PROFESSIONAL CLASS	<input type="checkbox"/> Physicist (PhD.) <input type="checkbox"/> Post Doctorate	<input type="checkbox"/> Graduate Student <input type="checkbox"/> Engineer	<input type="checkbox"/> Undergraduate <input type="checkbox"/> Technician	<input type="checkbox"/> Other (specify):
HOME INSTITUTION	Name of Home Institution		City	Country
	Your Department within the Institution		Main telephone number for that Department	
	<i>For Students and PostDocs</i>		<i>For All Others</i>	
Reason for Presence at Fermilab	Who told you to come to Fermilab? <input type="checkbox"/> Thesis Advisor <input type="checkbox"/> Other Professor within your Department <input type="checkbox"/> A Professor within your Experiment (not the spokesperson) <input type="checkbox"/> Chair / Dean of your Department <input type="checkbox"/> Experiment Spokesperson <input type="checkbox"/> Another person: (Name title or role):		What is your professional capacity: <input type="checkbox"/> Employed by a company or business <input type="checkbox"/> Employed by a university or similar institution as a researcher <input type="checkbox"/> Employed by a university or similar institution as a professor <input type="checkbox"/> Employed directly by a government agency <input type="checkbox"/> Employed by a national laboratory <input type="checkbox"/> Employed by another type of organization (<i>Explain</i>): _____ <input type="checkbox"/> Not employed, but affiliated with another organization (<i>Name the organization</i>): _____ <input type="checkbox"/> Other (<i>Explain</i>): _____	
	<i>For the person referenced above in this Part 4, provide the following information:</i>			
Contact Data	Last Name		First Name	Title
	Telephone		Alt. Telephone	Email
	Organization / Institution Name		Institution Website	
EXPERIMENT/ DEPARTMENT @ FERMLAB	Name of Your MAIN Experiment/Division at Fermilab		Name of that Experiment's Spokesperson or that Division's Head	

PART 5 – APPLICANT SIGNATURE	
<p><input type="checkbox"/> I CONFIRM THAT ALL OF THE ABOVE-LISTED INFORMATION IS TRUE AND COMPLETE. I further confirm that I will promptly advise Fermilab's User's Office of any changes in any of the above-listed information during the year following the date of this application. I understand that if I fail to advise the Users' Office of any changes in the above-listed information, my Visitor's ID Badge can be terminated and my access to the Fermilab site limited.</p> <p><input type="checkbox"/> I CONFIRM THAT I HAVE READ THE INFORMATION PROVIDED ABOVE RELATING TO THE NEED FOR MEDICAL INSURANCE COVERING INCIDENTS AT FERMLAB AND THE COSTS OF MEDICAL CARE WITHOUT INSURANCE. I further confirm that I have medical insurance covering me for incidents AT Fermilab.</p> <p><input type="checkbox"/> I CONFIRM THAT I HAVE REVIEWED THE ES&H TRAINING AND HAVE PASSED THE ES&H TEST. (See Attachment discussing ES&H Orientation training.)</p>	
Signed: _____	Date: _____

PART 6 – IF COMPUTING PRIVILEGES ARE BEING REQUESTED	
COMPLETE ONLY IF YOU DO NOT NOW HAVE COMPUTING PRIVILEGES, BUT WANT TO GET THEM. OTHERWISE, LEAVE THIS BLANK.	
You must read <i>FERMLAB'S COMPUTER SECURITY POLICY</i> at http://www.fnal.gov/cd/main/cpolicy.html .	
I, the Applicant for a Fermi ID Badge, confirm that I have read the <i>FERMLAB POLICY ON COMPUTING</i> , dated _____.	
ID Applicant Signature: _____	Today's Date: _____
OBTAIN A SIGNATURE BELOW ONLY IF YOU DO NOT NOW HAVE COMPUTING PRIVILEGES BUT WANT TO GET THEM. OTHERWISE, LEAVE THIS BLANK.	
Signed: _____	FNAL Ext: _____ ID#: _____
Spokesperson / Institution Representative / Division / Section Head	
<i>(The applicant does NOT sign here – only a person holding one of the above-listed offices signs here!)</i>	
Print Name: _____	Date: _____
<i>Applications for on-site access, and requests for computing privileges, that (A) contain signatures that are more than 1 month old and (B) authorized by a person who no longer is a Spokesperson or Institution Representative, must be confirmed by the Users' Office with the current Spokesperson or Representative prior to processing.</i>	

SOURCES OF INFORMATION FOR FERMILAB ID BADGE APPLICANTS

COMPUTING AT FERMILAB

All applicants for computing privileges at Fermilab must read *FERMILAB'S COMPUTER SECURITY POLICY* at <http://www.fnal.gov/cd/main/cpolicy.html>. Guidance for computer security at Fermilab is at <http://www.fnal.gov/cd/security/>. Computing privileges are managed by Fermilab's Computing Division, not by the User's Office. There are 2 ways to get computing privileges at Fermilab.

1. Obtain computing privileges *before* you physically arrive at Fermilab. This is done by submitting an online request for computing privileges as an "off-site" or remote user. This has the advantage of enabling you to access the Fermilab computing system once you arrive and go through the ID Badging process. If you do this, you may leave Part 3 of the Application Form blank. See http://computing.fnal.gov/xms/Services/Getting_Started/Introduction_to_Computing_at_Fermilab/Getting_Started_as_a_Non-Employee_Off-site_User.
2. Obtain computing privileges as part of the process by which you apply for a Fermilab ID Badge. To do this, you must sign Part 3 "Computing Privileges" and have your experiment's spokesperson or Division/Section Head sign Part 3 too.

If you are a member of a Fermilab experiment, check with the experiment administration to see whether there are additional steps to access the experiment's computing systems.

For further information about computing at Fermilab, see

http://computing.fnal.gov/xms/Services/Getting_Started/Introduction_to_Computing_at_Fermilab.

SAFETY COMPLIANCE – ES&H Training for All On-Site Users

Fermilab requires that all Users take an ES&H Orientation Class when they first arrive at Fermilab. (This training need not be renewed when you renew your Fermilab ID badge, unless extensive time has passed since your previous badge was issued).

The ES&H Orientation training must be completed *before* the Users Office issues your ID Badge.

A) Users who have computing privileges already: Users who already have Fermilab computing privileges (and therefore have a Fermilab ID number) may review the ES&H materials and take the requisite test online. You may use your own computer/laptop for this, or, if you physically are on site, you may go use the computer terminals available in the library (Wilson Hall, 3rd Floor).

To access materials, go to http://www-esh.fnal.gov/CourseHandout_Mat/NEO_Breeze/NEO_play_090421.htm. Select "Introduction to Fermilab New Employee/User Orientation".

At the end of viewing the presentations, click on "TEST" to request access to the On-line test. Input your Fermilab ID Number, and then click the "Go to Online Test" button. Then click the "Request Test" button to request an access code to complete an online test for the course. You will receive an email with a URL. The URL will give you access to the online test. Please note that the test must be completed within 48 hours of your request. You must pass the test within 3 attempts.

B) Users who lack computing privileges: Follow the instructions for applying a Fermilab ID Badge. This process will enable the User's Office to authorize you for computing privileges, as a result of which a Visitor ID number will be assigned to you. You then complete the ES&H training online, as outlined above for "Users Who Have Computing Privileges," after which your Badge is issued.

FERMILAB ORGANIZATIONS OF INTEREST

UEC – Users Executive Committee The Fermilab Users Organization is an organization of scientists and engineers currently engaged in advancing our understanding of the nature of matter and energy. Its purpose is to provide a forum for discussion of scientific and administrative matters relevant to the organization and functions of the Laboratory. In particular, it plays an important advisory role in determining the relationship of outside Users to the Laboratory and the support they will have in implementing their experimental programs. http://www.fnal.gov/orgs/fermilab_users_org/index.html

GSA -- Graduate Students Association The mission of the Graduate Student Association at Fermilab is to discuss and take action on matters affecting graduate students at the Lab. Students at every level of education, at US or foreign institutions, are encouraged to subscribe to the GSA listserv, and to participate in GSA events. To subscribe to the GSA listserv: 1. E-mail listserv@fnal.gov, 2. Leave the subject line blank. 3. Type "SUBSCRIBE FNALGRAD FIRSTNAME LASTNAME" in the email. <http://www.fnal.gov/orgs/gsa/>

WIST -- Women in Science & Technology WIST comprises Fermilab's women scientists, technicians, operators, and engineers. They meet roughly once a month for lunch and discussion on topics affecting members. WIST's mailing list also provides an opportunity to engage in discussions about issues affecting women working at Fermilab. To subscribe to the WIST listserv: 1. E-mail listserv@fnal.gov, 2. Leave the subject line blank. 3. Type "SUBSCRIBE WOMEN_SCIENTISTS FIRSTNAME LASTNAME" in the body of the email. <http://www-org.fnal.gov/fermilabwomen/Welcome.shtml>

NALWO -- (for Spouses and Family) The National Accelerator Laboratory Women's Organization hosts a wide range of social events for visiting women (especially mothers with children) and newcomers. **NALWO also coordinates English Language classes** for all visitors or newcomers to Fermilab. NALWO has its own listserv, where subscribers can be alerted about events. See <http://www.fnal.gov/orgs/nalwo/> and http://listserv.fnal.gov/scripts/wa.exe?SUBED1=nalwo_playgroup&A=1.

USEFUL URLS

Users Office	http://wdrs.fnal.gov/users/	US Tax Information for Non-US Citizens...	http://wdrs.fnal.gov/visas/taxes.html
Visa Office	http://wdrs.fnal.gov/visas/visas.html	Fermilab Telephone Book....	http://www-tele.fnal.gov/cgi-bin/telephone.script
Procedures for Researchers ...	http://www.fnal.gov/directorate/PFX/PFX.pdf	Map of Fermilab	http://www.fnal.gov/pub/visiting/map/site.html
GSA Guide to Life (revised Wiki format!)	http://gsawiki.fnal.gov/		