

**BACKGROUND CHECK NEEDS ASSESSMENT/INITIATION REQUEST
CENTRAL SUITABILITY OFFICE (CSO)**

This is a request to the CSO to conduct a background check needs assessment and initiate the appropriate background check in e-QIP, if applicable, following the favorable completion of an Installation Records Check (IRC). This request should only be submitted to CSO in cases where Installation HR personnel do not have access to e-QIP.

SECTION I: APPLICANT INFORMATION

1. APPLICANT NAME <i>(Last, First, Middle) (Do not use initials or abridgements.)</i>	2. SSN	3. PHONE NUMBER
4. HOME ADDRESS	5. EMAIL ADDRESS	
6. POSITION CATEGORY <i>(If CDH Provider Household Member list Sponsor Name)</i>	7. FINGERPRINT SUBMISSION DATE/METHOD OF SUBMISSION	

SECTION II: HUMAN RESOURCES POINT OF CONTACT INFORMATION

8. HUMAN RESOURCES POINT OF CONTACT NAME <i>(Last, First, and Middle name) (Do not use initials or abridgements)</i>	
9. EMAIL ADDRESS	10. PHONE NUMBER