

**1.1.1 Closed Area Access Briefing – Acknowledgement Sheet**

**APPLICANT AGREEMENT FORM**

I have received a copy of the Closed Area Security Briefing for (Indicate area name):  
 \_\_\_\_\_  
 My signature affirms my understanding of the document and agreement to fully comply with the rules and procedures for this Closed Area.

First Name	Middle Initial	Last Name	Company or Gov. Branch	LM Employee Number

Non-LM Personnel: LM Badge Number (1 <sup>st</sup> 5 digit number on back of badge)	Non-Lockheed Martin Personnel - Business E-Mail Address:
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Program supporting (List all that apply):	Reason for Access:
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<b>Briefing Acknowledgement Signature</b>	NAME (Printed/Signed/Dated): _____
	Or Electronic Signature: _____

**LOCKHEED MARTIN - MANAGEMENT APPROVAL**

Lockheed Martin management signature is required for all persons given area access or continued access. Note to LM Manager: Your signature affirms this individual has need for access into a Closed Area.	
<b>LM Manager Verifying Access (Need-To-Know)</b>	NAME (Printed/Signed/Dated): _____
	Or Electronic Signature: _____
Name of LM-Manassas Point Of Contact (POC) if known: _____	

**SECURITY APPROVAL**

<b>Security Authorization</b>	NAME (Printed/Signed/Dated): _____
	Or Electronic Signature: _____

<b>Security or Individual Approved by Security</b>	Clearance: S____ TS____ Special Briefing: _____
	Visitor: YES____ NO____ Visit Request Expires: _____
	Verified By: _____ Date: _____