DD Form 2875, MAY 2004 (EF) Continuation Sheet for Block 27

(OS/390 – z/OS) SYSTEMS

PRIVACY ACT STATEMENT

AUTHORITY Executive Orders 10450, 9397, and Public Law 99-474, The Computer Fraud and Abuse Act.

PRINCIPAL PURPOSE To record names, signatures, and Social Security numbers for the purpose of validating the trustworthiness of individuals requesting access to Department of Defense (DoD) systems and information.

ROUTINE USES In addition to those disclosures generally permitted under 5 U.S.C. 552a(b) of the Privacy Act, these records or information contained therein may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 552a(b)(3) as follows: The DoD "Blanket Routine Uses" set forth at the beginning of DoD's compilation of systems of records notices apply to this system.

DISCLOSURE Disclosure is voluntary; however, failure to provide the requested information may impede, delay, or prevent further processing of this request.

1. ACTION (Check one)
☐ INITIAL ☐ MODIFICATION ☐ DELETION

2. USERID (Blank if Initial)

3. User's four digit PIN:
You must remember this PIN.

4. NAME Last First MI

5. TELEPHONE (Include area code)
Comm: DSN:

6. INVOICE ACCOUNTING CODE (IAC)

Internet E-Mail:

7. STATUS ☐ Contractor ☐ Federal Employee

7a. FOREIGN NATIONAL ☐ Yes ☐ No

8. ORGANIZATION (Commercial mailing address)

9. I certify that this user has a previous DD2875 or DISA Form 41 on file.

a. Signature and typed name of responsible security officer/TASO

_____

b. Internet E-Mail

c. Date _____

10. SIGNATURE AND TYPED NAME OF SUPERVISOR

a. _____

b. Date _____

11. STATEMENT OF ACCOUNTABILITY – I understand my obligation to protect my password. I assume the responsibility for data and system I am granted access to. I will not exceed my authorized access.

a. User's Signature _____ b. Date _____

12. FACILITY ☐ ADD ☐ DELETE	a. ☐ TSO Show Resources	b.	c.	d.	e.	f.	g.

13. UserID or JOB ACID	14. ACTION CODE Add {A} Change {C} Delete {D}	15. PROFILE OR SPECIAL PROGRAMS IDENTIFIER	16. DATA SET NAME		17. ACCESS TYPE Fetch Create Read Scratch Update All (Use first letter of word to fill in below)	18. TIME FRAME (# days)	19. IDMS CICS OTRAN	20. FDO INITIALS
			a. HIGH LEVEL PREFIX	b. ADDITIONAL LEVELS (If greater then 26 characters complete in remarks)				

21. Remarks/Justification

22. SIGNATURE(S) AND TYPED/PRINTED NAME(S) OF INFORMATION OWNER(S)/OPR(S) AND DATE(S)

a._____ _____ c. _____ _____

b._____ _____ d. _____ _____

23. PROCESSED BY (TYPED/PRINTED NAME/SIGNATURE OF SECURITY ADMINISTRATOR(S) AND DATE (S))

a._____ _____ c. _____ _____

b._____ _____ d. _____ _____