Security and Investigations Center
VA Enterprise Centers

Current Date:

Reciprocal Request

CONTRACTOR
Background Investigation Request

VA Organization Billing Information

VA Organization | VISN # | Station #

City | State

Contract Employee Information

SSN | Email Address

Last Name | Current Phone Number

First Name | Address 1

Middle Name | Address 2

Gender | Date of Birth (MM/DD/YYYY) | City

City of Birth | State of Birth | State | Zip Code

Country of Birth | Country of Citizenship

Employed By (Company/Corp) | Employer POC

POC Phone Number | POC Email Address

POC Address 1 | City

Address 2 | State | Zip Code

Duty Position Information

VA Organization | Duty Address 1

Division/Station | Duty Address 2

DUTY STATION NUMBER | Duty City | State | Zip

Employee Type | Duty Phone Number

Position Title | HR Email Address

Type of Investigation Required | Access to Classified Information

CO/COTR

Name of CO/COTR | CO/COTR Phone Number

CO/COTR Email Address | CO/COTR Station #

CO/COTR Address 1 | City

Address 2 | State | Zip Code

Print Form