

**DEPARTMENT OF THE ARMY**  
**US ARMY GARRISON CARLISLE BARRACKS**  
**22 ASHBURN DRIVE**  
**CARLISLE, PENNSYLVANIA 17013-5000**

31 March 2023

Directorate Emergency Services

Dear Visitor:

You are denied unescorted access to Carlisle Barracks based on the results of a background check using the National Crime Information Center-Interstate Information Index (NCIC-III). The background check results contain credible derogatory information, and accordingly, it has been determined that you are not eligible for unescorted access to the Carlisle Barracks Installation.

**At this time, you are required to immediately depart Carlisle Barracks to include the Meadows, the Golf Course and the Army Heritage and Education Center.**

You may request a waiver of your denied unescorted access request by using the following process:

a. Complete an Installation Access Control Deny Waiver Request packet and provide this to your Government sponsor, who will be responsible for submitting the waiver application. All sections must be completed, and you must attach a copy of your photo identification (i.e. State Driver's License). For assistance or questions regarding your denied waiver packet please contact the Carlisle Barracks Police Detective at (717) 245-4328.

b. Your Government sponsor will review your packet for completeness and determine whether or not to endorse your request for a waiver.

c. If your Government sponsor decides to endorse the waiver, they must provide a letter of recommendation addressing the derogatory information and why this information should not prohibit you from having unescorted access to the installation. Your Government sponsor will submit your waiver application, and his or her letter of recommendation thru the Director Emergency Services (DES) and Command Judge Advocate (CJA) to the Garrison Commander.

d. The Garrison Commander will render a decision regarding your request and provide you with a copy of the determination.

If your waiver request is denied, you may request reconsideration one year from the date of the decision. You may also request reconsideration earlier than one year if you can present significant information which was not reasonably available at the time of the original waiver application, or if you can show that the criminal offense for the original denial was overturned, rescinded, or expired.

ROBERT V. SUSKIE, JR  
Director Emergency Services  
USAG Carlisle Barracks

## Denial Waiver Application

**WARNING: ANY MISREPRESENTATION OR OMISSION OF INFORMATION MAY RESULT IN DENIAL OF THE REQUEST**

<u>REQUEST FORM</u>			
Please type or print neatly; Attach additional sheets if necessary			
1. Name ( <i>First/Middle/Last</i> )			
2. Current Address ( <i>Number and Street, City, State, and ZIP Code</i> )			
3. Email address:			
Do you want the decision emailed back or mailed to you? _____ Yes			
4. Current Telephone Number			
Home (    ) _____ - _____      Work (    ) _____ - _____			
5. Reason for requesting access to Carlisle Barracks?			
6. What job has Carlisle Barracks offered you?			
7. Does your job require you to have a security clearance?			
8. List Your <b>ENTIRE</b> Criminal History ( <i>except traffic and other infractions</i> ) as follows:			
CRIME FOR WHICH YOU WERE ARRESTED	CRIME FOR WHICH YOU WERE CONVICTED (OR INDICATE IF <i>DISMISSED OR Nolle Prosequi.</i> )	NAME & ADDRESS OF COURT OR AGENCY	DISPOSITION (INCLUDE SENTENCE AND CONVICTION DATE)

9. Attach a copy of all court documents, certified by the Clerk of the Court, from all of your conviction(s).
10. In your own words, explain the facts of each felony, and why you should be able to come on post. Attach additional sheets if necessary.
11. Explain any circumstances that lessen the seriousness of the felony conviction(s) and show that you have been rehabilitated. Attach additional sheets if necessary.
12. Have you been denied access by any other Federal Organization? <i>(please circle)</i>
a. Yes                      No
b. If yes, indicate the reason for the denial.

13. List all references you would like the review officer to consider on your behalf. Include name, address, telephone number, and relationship:


**VERIFICATION**

State of \_\_\_\_\_

County of \_\_\_\_\_

Under the penalty of perjury, the undersigned has examined this request for review and to the best of my knowledge and belief, it is true, complete, and correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date (*Month, Day, Year*)

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared and acknowledged the execution of the foregoing instrument as his/her voluntary act and deed.

WITNESS, my hand and Notarial Seal, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public, Written Signature