REQUIRED SECURITY CLEARANCE FORM

Recent Advances in Artificial Intelligence for National Security (RAAINS)



Date(s) of Event: Completed Form due date:

No previous long-term visit requests on file at MIT Lincoln Laboratory will be used as approved admittance to the above event.

The individual named below requests authorization to attend the above event. It is understood that the overall Security Classification will be Top Secret/SCI.

Classification will be Top Secret/SCI.				
Part 1. TO BE COMP	PLETED BY AT	TTENDEE		
Name	First	Initial	SSN(Note: SSNs will not be stored.)	
Company Name			Date of Birth	
Company Address			Place of Birth	
Signature			Citizenship	
Part 2. TO BE COMP Security Clear	PLETED BY AT		ECURITY	
Attendee's Clearance Level			Cage Code	
Signature of Security Officer (POC)			Date Tel. No	
Print Name and Title of Security	/ Officer (POC)			
Lincoln Laboratory supports the position organization disclosing classified information of the control of the c		Secretary of Defense t	that "Need-to-Know" determinations are made by th	те
	Fax: MIT Security S Unclassified Classified Email: Pa	fficer may return com Lincoln Laboratory Services Department ied Fax: 781-981-6718 d Fax: 781-981-4262 or assword-protected*, cont@ll mit edu	8	

*REQUIRED



^{*}The information on this form is protected and secured from public view and access in accordance with Laboratory Security Procedures protecting Personally Identifiable Information in accordance with Massachusetts General Law.