



## Armed Security Officer (ASO) Program Application Guidance

Newly-implemented security procedures for General Aviation (GA) at Ronald Reagan Washington National Airport (DCA) require that an armed security officer (ASO) be onboard each aircraft authorized to operate into and out of DCA. In order to serve as an ASO, interested persons must meet certain eligibility criteria and complete an application process that includes background, criminal history, and employment verification checks. Applicants meeting the established criteria must also complete two days of training conducted at 21 locations nationwide. Applicants that successfully complete the ASO training program will be credentialed and authorized by TSA to serve on scheduled GA flights into DCA.

The following information is being provided to persons interested in applying to become an ASO.

### Eligibility Criteria

In order to become an ASO, an applicant must:

- Be at least 21 years of age;
- Be free from any physical condition which might adversely affect the exercise of the requirements of the position;
- Be free from any emotional or mental condition, including any personality disorder or job-relevant psychopathology which might adversely affect the exercise of the requirements of the position;
- Be a U.S. citizen;
- Be an active Law Enforcement Officer (LEO) in good standing; a qualified retired LEO; or a qualified former LEO in good standing with a minimum of four years law enforcement experience as defined by TSA;
- Have successfully completed a certificated program of basic law enforcement training conducted by an entity authorized to train persons to perform as a law enforcement officer;
- Be eligible to obtain an FAA Class II Medical Certificate;
- Not have been convicted of any domestic violence offence; and
- Not have had an authorization, deputation, or commission revoked by TSA

### How to Apply

In order to apply for the ASO Program, you must complete the following steps:

- 1) Print out and complete the ASO Nomination Form. Part 1 of the form must be completed and signed by you, the applicant. Part 2 of the form must be completed and signed by an authorized representative of the Fixed Base Operator (FBO) or aircraft operator nominating you to participate in the ASO Program. Keep the signed original form for your application package, and have the FBO or aircraft operator retain a copy for their records. A representative of the FBO or aircraft operator will provide you with printed instructions on where and how to be fingerprinted, as well as contact information for the local Federal Air Marshal Service (FAMS) field office where your application materials will be submitted for initial processing. The representative will also discuss with you certain costs involved in the fingerprinting process.

- 2) Obtain documentation certifying that you have completed a program of basic law enforcement training. This documentation may consist of a copy of your graduation certificate or a signed letter from an authorized representative of the training facility attesting to your successful completion of training. This documentation must be included with your application package.
- 3) Print out and complete the U.S. Office of Personnel Management Standard Form 85P (Questionnaire for Public Trust Positions). Important: You do not have to complete items 10, 14, 15, 17, and 19 on the SF 85P. The standard waiver at the end of the form must be completed and signed. The medical waiver does not need to be completed. The completed form must be included with your application package.
- 4) Print out a Lautenberg Certification Form affirming that you have not been convicted of any domestic violence offence. Do not sign the form. Bring it with you to the FAMS field office where you submit your application package. You will sign the form in the presence of the FAMS representative who receives your application.
- 5) Print out a copy of the Sensitive Security Information (SSI) Non Disclosure Agreement. Do not sign the agreement. Bring it with you to the FAMS field office where you submit your application package. You will sign the agreement in the presence of a FAMS representative who receives your application.
- 6) Obtain an FAA Class II Medical Certificate. The certificate must be completed by an FAA-designated Aviation Medical Examiner (AME). Be sure to bring a copy of the certificate along with the other materials in your application package ([www.faa.gov](http://www.faa.gov))
- 7) If you are a currently active LEO, you must provide, on agency letterhead, written authorization from your supervisor or agency authorizing official to participate in the ASO program. The letter must also indicate whether or not you are authorized to use your department- or agency-issued firearm in connection with the ASO program. If use of your department- or agency-issued firearm is authorized, the letter must state the make, model, caliber, and serial number of the weapon. Weapons and ammunition must be of a type approved by TSA.

Once you have completed these steps, you should contact your closest FAMS field office, and arrange to bring in your completed application package for initial processing. While there, you will review and sign the Non Disclosure Agreement and Lautenberg Certification Form, be photographed, and provide an electronic signature that will be used to prepare your ASO credentials. You must bring two (2) pieces of government-issued identification (i.e. driver's license, military ID, voter registration card, law enforcement credentials, etc.) in order to be processed.

Additional details regarding program eligibility and participation is available from TSA in the [Frequently Asked Questions \(FAQs\)](#).



**Transportation  
Security  
Administration**

**Armed Security Officer (ASO) Nomination Form**

FAX COMPLETED FORM TO: 571-227-1943

*To Be Completed by ASO Applicant*

**ASO Applicant Name:** \_\_\_\_\_  
(First, Middle, and Last)

**Home Tele. #:** \_\_\_\_\_ **Work Tele. #:** \_\_\_\_\_

**Alternate Contact #:** \_\_\_\_\_ **E-mail Address:** \_\_\_\_\_  
(If applicable)

**Home Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*To Be Completed by the Nominating Entity*

**Nominating Entity:** \_\_\_\_\_ ( ) **Fixed Based Operator (FBO)** ( ) **Aircraft Operator**  
(Check Appropriate Operation)

**Company Name:** \_\_\_\_\_

**Point of Contact's Name:** \_\_\_\_\_  
(First, Middle, and Last)

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Home Tele. #:** \_\_\_\_\_ **Work Tele. #:** \_\_\_\_\_

**Alternate Contact #:** \_\_\_\_\_ **E-mail Address:** \_\_\_\_\_

**Upon Qualification, I request to be added to the list of qualified ASOs that may be provided to FBOs, aircraft operators, and security companies that require the list** (Signature): \_\_\_\_\_

I have spoken with the applicant, whose name appears on this form, and will nominate this individual to undergo TSA vetting and participation in the Armed Security Officer program for GA operations into Reagan National Airport.

**Nominating Entity Point of Contact**

**Print Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**FOR OFFICIAL TSA USE ONLY**

Date Cleared by TSA: _____	TSA Official's Initials: _____
Comments:	

PRIVACY ACT (e) (3) NOTICE

**AUTHORITY:** 49 U.S.C. § 114; Pub. L. 108-176. **PRINCIPAL PURPOSE(S):** To identify individuals eligible to serve as armed security officers aboard general aviation flights into DCA. **ROUTINE USE(S):** This information you provide may be shared with aircraft and airport operators, and the FAA, or for routine uses identified in TSA system of records, DHS/TSA 002, Transportation Security Threat Assessment System. **DISCLOSURE:** Voluntary; failure to furnish the requested information may result in delays in processing or denial of your nomination.

PAPERWORK REDUCTION ACT BURDEN STATEMENT

This is a mandatory collection of information if you wish to serve as an armed security officer onboard a flight to or from Ronald Reagan National Airport (DCA) in Washington, DC. The total average burden per response associated with this collection is estimated to be approximately 20 minutes. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a valid OMB control number. The control number assigned to this collection is OMB 1652-0035.



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**LAUTENBERG CERTIFICATION**

The Lautenberg Amendment to the Gun Control Act of 1968 (18 U.S.C. §922) makes it unlawful for any person who has been convicted of a misdemeanor crime of domestic violence to ship, transport, possess, or receive firearms or ammunition. This prohibition applies to persons convicted of such misdemeanors at any time.

A misdemeanor crime of domestic violence is defined as one that includes the use or attempted use of physical force, or the threatened use of a deadly weapon, committed by a current or former spouse, parent or guardian of the victim, by a person with whom the victim shares a child in common, by a person who is cohabiting with or has cohabited with the victim as a spouse, parent, or guardian, or by a person similarly situated to a spouse, parent or guardian of the victim.

Please complete the following certification:

<p>Have you even been convicted of a misdemeanor crime of domestic violence as defined above?</p> <p>Yes _____ No _____ Not Sure _____ Initial &amp; Date _____</p>
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<p>If you answered "yes" to this question, please provide the following information with respect to your conviction:</p> <p>Court/Jurisdiction: _____</p> <p>Docket/Case Number: _____</p> <p>Statute/Charge: _____</p> <p>Date of Disposition: _____</p>
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I (print your first name, middle initial, last name), \_\_\_\_\_, hereby certify that, to the best of my knowledge and belief, all of the information provided by me is true, correct, complete and made in good faith. I understand that any false statement or fraudulent information provided here may be punishable pursuant to Federal law, including 18 U.S.C. Section 1001.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date