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U.S. DOE - Naval Reactors Personnel Security Information Reporting Form (Reportable By Others - Apparent Or Suspected Drug Use, Misuse, Or Activity)

The individual filling out this form is responsible for ensuring no classified, Unclassified Controlled Nuclear Information, or Unclassified Naval Nuclear Propulsion Information is included or attached.

Check box if this report is regarding some other cleared individual. Provide your contact information here. Leave blank any clearance holder information not known.

Name: (self-reporting leave blank) Phone Number: Unclassified Email Address:

CLEARANCE HOLDER/APPLICANT INFORMATION THIS REPORT IS APPLICABLE TO

Today's Date: Federal Work Location (Site and City/State):
Contractor

Name (Last, First, Middle): Employer:

Date of Birth: Last 4 SSN: DOE# (If Known) Clearance Level: Special Access:
HRP SCI

Home Address: City, State, Zip

Work Phone: Home or Cell Phone: Unclassified Email Address: (for any questions)

Reportable by Others Section

Apparent or Suspected Drug Use/Misuse or Drug Activity

To ensure the protection of classified/sensitive information, you must report when a covered individual is involved in, or suspected to be involved in, activities that may be of potential security or counterintelligence (CI) concern. Covered individuals are anyone who has access to classified information or who hold sensitive positions, including, but not limited to, contractors, subcontractors, licensees, certificate holders, grantees, experts, consultants, and government employees.

Attach additional pages with your answers if this form doesn't provide adequate space for reported information.

Do not include any NNPI, UCNI, or classified information on this form.

Submit this form and also perform prompt notification directly to the Security Director if the observation occurs on site.

See next page for entry of the information you are reporting"

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Please report any apparent or suspected drug use/misuse. Examples may include, but are not limited to: workplace incidents or violations involving drugs, excessive use of leave or consistent tardiness that is suspected to be related to drug use, known or suspected arrests or contact with law enforcement relating to drugs, behavior observed in the workplace that is consistent with drug use/misuse (i.e. slurred speech, unusual behavior, odor of marijuana etc.), or any known treatment or hospitalization related to drugs. Please fully describe the incident, activity, behavior, etc., and include the who, what, when, where, why, and how:

Questions may be directed to the NR PERSEC Helpdesk: NRPERSEC.Helpdesk@nrp.doe.gov or 518-395-6373

I certify or affirm that the information on this form is true and correct, to the best of my knowledge.

Signature:

Date:

Signature may be electronic or wet.

Submission Instructions

When complete, sign the form and forward to the Naval Reactors Personnel Security Office. Keep a copy of your submission for your own personal records.

Contact the NR Personnel Security Office for any form submission questions.

Submission methods

*** DO NOT SUBMIT BETWEEN DIFFERENT NETWORKS DUE TO SYSTEM COMPATIBILITY PROBLEMS ***

1. From NMCI, send to steve.a.bowen.civ@us.navy.mil AND arthur.m.duvall.civ@us.navy.mil
2. From DOECO, send to nrpersec.helpdesk@nrp.doe.gov
3. From PrimeNet, send to nrpersec@unnpp.gov
4. From NNPP Net (high side), send to nrpersec@nnpp.gov
5. By FAX, 518-395-6078
6. By mail, US Dept of Energy, NR PERSEC, PO Box 1069, Schenectady, NY 12301-1069
7. From corporate and personal E-mail accounts, send via a password-protected PDF in an unencrypted mail to the Personnel Security Office at nrpersec.helpdesk@nrp.doe.gov and send the password for the PDF to the Personnel Security Office via a second, separate email.

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