Provide SOI (if amending): [   ]

Corresponding SOI(s) (if applicable): [   ]

SECURITY OFFICE IDENTIFIER (SOI) CREATION AND AMENDMENT FORM
ATTENTION: SECURITY OFFICER

The Defense Counterintelligence and Security Agency (DCSA) authorizes each agency security office a 4-character identifier called the SOI. The SOI permits DCSA to return investigative reports to agency-approved addresses. The SOI also permits security offices to obtain detailed investigative information. The security office must provide DCSA following:

- Name and social security numbers for authorized callers
- An accurate mailing address for the security office
- Type and date of most recent background investigation completed on the authorized callers

To request an SOI or advise DCSA of SOI changes, legibly complete the necessary items on the form below.
Submit the form via mail, fax, or messaging in the NP2 portal to DCSA SON SOI. Do not submit PII through unsecure channels. For additional information and/or assistance, call **DCSA** at **878-274-5086**

1. **Check this block if requesting a new SOI:** [   ]
2. **Change/add agency name and/or address (include zip code):**
   Agency Name: [   ]
   Address: [   ]
   City: [   ]   State: [   ]   Zip Code: [   ]
3. **Change/add security office telephone numbers (DCSA does not have DSN capabilities):**
   Commercial: [   ]   Extension: [   ]   Commercial: [   ]   Extension: [   ]
4. **Change/add financial fields:**
   Treasury Account Symbol (TAS): [   ]
   Intra-Governmental Payment & Collection (IPAC): [   ]   Business Event Type Code (BETC): [   ]
5. **Change/add security officer (Requires Favorable Adjudication T3 or higher):**
   Name: [   ]
   SSN: [   ]   Type/date of last investigation: [   ]
6. **Add authorized callers (Requires T2 or higher):**
   Name: [   ]   Name: [   ]
   SSN: [   ]   SSN: [   ]
   Type/date of last investigation: [   ]   Type/date of last investigation: [   ]
7. **Delete authorized callers:**
   Name: [   ]   SSN (last 4): [   ]
   Name: [   ]   SSN (last 4): [   ]
8. **Add email address (NOTE: Do not provide individual's email address):**
   Provide a group email address for form processing questions: [   ]
   Provide a group email address for pending case questions/notifications: [   ]
   Provide a group email address for continuous evaluation notifications: [   ]

SOI Security Officer Name: [   ]   **Signature:** [   ]

Email Address: [   ]

This form should be duplicated as needed.