

INSTRUCTIONS FOR NATO SECURITY CLEARANCE CERTIFICATE (NSCC)

The following certificate form must be completed in full. Failure to complete all of the fields will result in the NSCC being rejected.

GENERAL INSTRUCTIONS

Section 1 *(Top half of form)*

- The information requested within the fields of the top two lines of the form can be verified using the Defense Information System for Security (DISS).
- The field below the "In accordance with" paragraph should state the subject's NATO security clearance level (select from the bulleted items listed on the form).
- Provide name of the NATO Agency to be visited and its address.
- Provide the date of issue, which is the date of the first day of the visit. This should be the same date cited on the Request for Visit (RFV).

Section 2 *(Bottom half of form)*

- The certificate expiration date listed must be no later than the last day of the subject's visit. This should be the same date cited on the RFV.
- The certificate is NOT valid without the signature of the company security manager or Facility Security Officer.
- Be sure to include date of signature and phone number of company security manager or Facility Security Officer in the appropriate fields.

**Upon completion, fax certificate along with Request for Visit to
DCSA International at (571) 305-6010, ATTN: International**

NATO Security Clearance Certificate

1. Certification is hereby given that:

Visitor Full Name: _____

Date of Birth: _____ Place of Birth: _____

(City)

(State) (Country)

Has been granted a security clearance by the Government of:

United States of America

In accordance with current NATO regulations, including the Security Annex to C-M (64) 39 in the case of ATOMAL information, and is, therefore, declared suitable to be entrusted with information classified up to and including:

(Select Visitor's NATO security clearance level from the list below)

- COSMIC TOP SECRET
- NATO SECRET
- NATO CONFIDENTIAL
- COSMIC TOP SECRET ATOMAL
- NATO SECRET ATOMAL
- NATO CONFIDENTIAL ATOMAL

NATO Agency to be visited: _____

Address: _____

Date of Issue: _____

(Date of the first day of visit)

2. This certificate will expire no later than: _____

(Date of expiration is the last day of the visit)

Signature of Company Security Officer or Facility Security Officer

Date

Telephone # _____

ISSUED BY:

NAME: Defense Counterintelligence and Security Agency
Critical Technology Protection
ADDRESS: Attn: International Visits
27130 Telegraph Road
Quantico, VA 22134
FAX: 571-305-6010
EMAIL: dcsa.rfv@mail.mil

(FOR DCSA USE ONLY)
Official Government Stamp
