

14th Flying Training Wing



Cultivate Airmen, Create Pilots, Connect



Visitors Passes





Information Needed for Pass



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Step 1. Email <u>14SFSS5B@us.af.mil</u> with the below information for each visitor:

- Full Name of Visitor
- Date of Birth
- Drivers License Number/State of Issue or Any federal issued identification
- Social Security Number (SSN)
- Vehicle Information (Make, Model and Plate Number of Vehicle)
- Start/end date of the stay as well as where they will be residing
- Sponsors Name and SSN
- First time visitors need to pre-register in an effort reduce wait times at:
 - <u>https://dbids-global-enroll.dmdc.mil/preenrollui/#!/</u>

Step 2. Previous visitors: An e-mail will be sent to the sponsor letting them know the visitor(s) have passed the background check and the pass is ready for pick up.

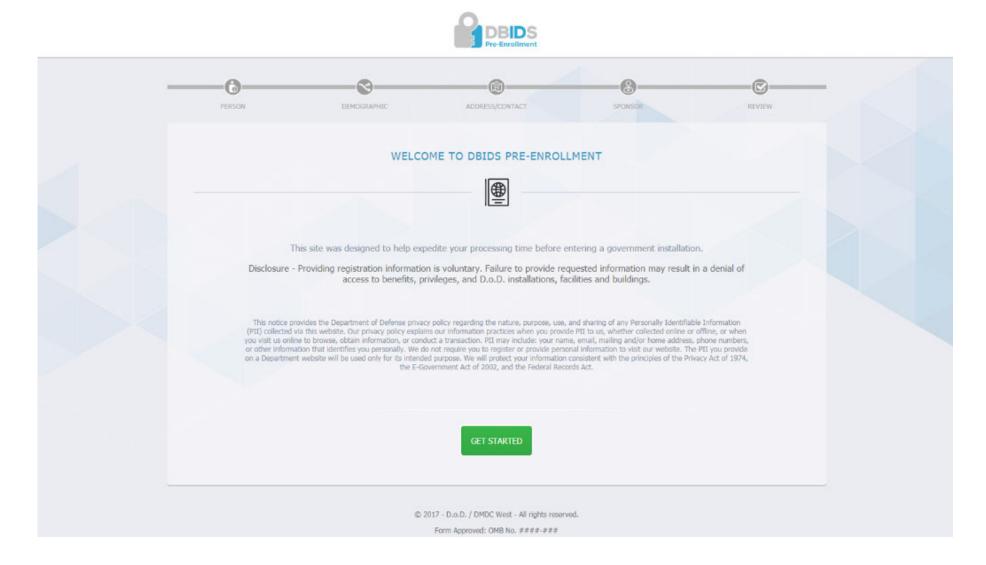
Step 3. First time visitors: An e-mail will be sent to the sponsor letting them know the visitor(s) have passed the background check and the visitor center is ready for them to provide fingerprints and take the photo for the pass.

NOTE: If a member were not to pass the background check an e-mail will be sent to the sponsor informing them the request for pass is denied.















-	PERSON	DEMOGRAPHIC	ADDRESS/CONTACT	SPONSOR	REVIEW	
			PERSON INFORMATION O These fields ARE required			
	Name					
	Doe	John		D Sr	•	
	Date of Birth		Country of Birth	Citizenshi	p	
	January * 1	• 1929	United States	• United	States •	
		Primary Identifier	121212121			
		Secondary Identifier Passport Issuing Country United States	33423424332444444			







PERSON	DEMOGRAPHIC		SPONSOR	REVIEW
	DEI	MOGRAPHIC INFORMATIO	N	
	01	These fields are NOT required but recomen	ded	
Gender	Ethnicity	Hair Color	Eye Color	
Male	* White	* Blond	* Brown	
Height		Weight		
6	* 0 *	134		
Occupation				
Manager				
BACK		Step 2 of 5		NEXT
DACK				NEXT



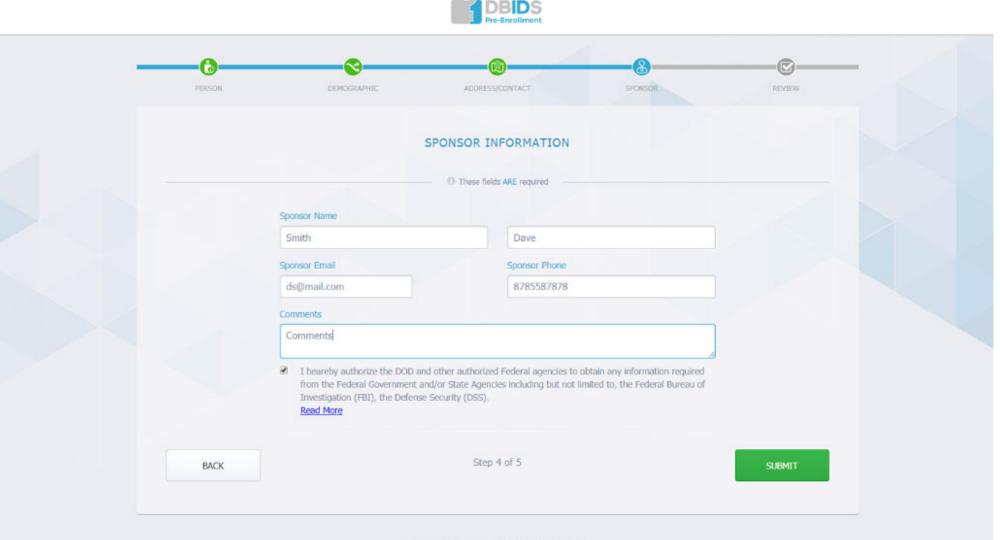


PERSON	DEMOGRAPHIC	ADORESS/CONTACT	SPONSOR		REVIEW
	ADDR	ESS/CONTACT INFOR	MATION		
		These fields ARE required			
Primary Address					
2 Main Street		Line 2 (optional)			
City/Town	State/Pro	vence	Zip/Postal	Country	
City Ville	Alaska	*	12345	United States	¥
Туре					
Home	Y				
		• Add Address			
	Email		Туре		
	email@email.com		Home		
	Phone		Туре		





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