

ESCORT PRIVILEGE TRAINING AGREEMENT

All applicants requesting Escort Privilege must review and complete the form below.

Escort means to accompany or monitor the activities of an individual who does not have unescorted access authority into or within a Secure Area or Security Identification Display Area (SIDA). Escort privilege is noted on the front of a badge by a red "E."



Applicant Information:

Full Name: _____ **Organization:** _____

1. I understand that only person(s) and/or vehicle(s) with an "operational need" for access may be escorted into SIDA, Secure Areas, Sterile Areas, Restricted Areas and/or Aircraft Operations Areas (AOA). Initial: _____

2. I understand that I am responsible for the actions of any person(s)/vehicle(s) under my escort. Initial: _____

3. I understand that I must be able to control the actions of the individual(s)/vehicle(s) I am escorting noted in item 1. Initial: _____

4. I understand that I must maintain a visual sight and vocal range contact with the individual(s) and not become involved in any other activity besides the responsibility of my my escort. Initial: _____

5. I understand that once I begin escort I am responsible for the person(s) until they exit the area or I receive an acknowledgement of acceptance of escort from another authorized person. Initial: _____

6. I understand that all vehicles I escort into a secure or restricted area must remain under escort until they exit the area. All vehicles in the Secure Area under my escort must be clearly marked with company name and/or Airport issued vehicle media. Initial: _____

7. I will notify, by the most expedient means available, Airport Operations at 803-822-5050 and/or Airport Public Safety at 803-822-5025 immediately upon any deviation from these rules. Initial: _____

8. I acknowledge that I have been trained in the rules, regulations and requirements of proper escort of persons in the SIDA, Secure Areas, Sterile Areas, Restricted Areas and/or AOA according to the requirements of the Airport Security Plan as specified by TSA Regulations 49 CFR 1542. Initial: _____

9. **I agree that the information provided on this Request Form is true, complete and correct to the best of my knowledge. I understand that knowing and/or willful false statements on this Request can be punished by fine and / or imprisonment. (See section 1001 of Title 18 of the United States Code)** Initial: _____

Applicant Verification:

Signature: _____ **Date:** _____