Privacy Act Statement

AUTHORITY: Title 10, U.S. Code, Sections 5014 and 5020

PURPOSE: To determine the facts and circumstances surrounding allegations or complaints against Naval personnel and/or Navy/Marine Corps activities. To present findings, conclusions, and recommendations developed from investigations and other inquiries to the Secretary of the Navy, CNO, CMC, or other appropriate Commanders. Disclosure of Social Security Account Number is voluntary, and if requested, is used to further identify the individual providing the information.

ROUTINE USES: The information is used for the purpose set forth above and may be:

- Forwarded to Federal, State, or local law enforcement agencies for their use;

- Used as a basis for summaries, briefings, or responses to Members of Congress or other agencies in the Executive Branch of the Federal Government;

- Provided to Congress or other Federal, State, and local agencies, when determined necessary.

MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION:

For Military Personnel: Disclosure of personal information is mandatory and failure to do so may subject the individual to disciplinary action.

For Department of the Navy Civilians: Failure to disclose personal information in relation to individual’s position responsibilities may subject the individual to adverse personnel action.

For All Other Personnel: Disclosure of personal information is voluntary and no adverse action can be taken against individuals for refusing to provide information about them.

ACKNOWLEDGMENT
I understand the provisions of the Privacy Act of 1974 as related to me through the foregoing statement.

PRINTED NAME: [b] (6) [b] (6) [b] (6)

Signature: [b] (6) [b] (6) [b] (6)

Date: 25JUN2016
CONFIDENTIALITY STATEMENT

In order to protect the confidentiality and rights, privacy, and reputation of all people involved in a Commander, Navy Installations Command (CNIC) Inspector General (IG) fact-finding consultation (inquiry, investigation, or Hotline) I may periodically be consulted by a CNIC IG investigator. I understand that I may not discuss or reveal any matters or aspect of the subject consultation(s) with anyone without permission of the CNIC IG. If someone attempts to gain information specific to my consultation with the investigating officer, I will notify the CNIC IG immediately.

I understand that my identity will be protected from disclosure to the extent possible, consistent with the fact-finding mission of an inquiry/investigation; however, that confidentiality cannot be guaranteed. I understand that disclosure of my identity may be made to competent authority and persons who have a need to know. Acknowledging that withholding consent may hinder the IG fact-finding process and may result in a lack of necessary information, I consent to the disclosure of my identity as necessary to produce a complete and impartial inquiry.

Therefore, I agree to keep confidential all information related to any inquiry/investigation which CNIC IG investigator may address with me. I also understand that this confidentiality agreement remains in effect until I am released from this responsibility by CNIC IG or other competent authority.

PRINT FULL NAME (b) (6) 

SIGNATURE (b) (6) DATE 25JUN2016

Failure to adhere to the conditions of this document may result in being charged with a violation of Title 18 United States Code, Section 1512.
Importance of Presenting Truthful Testimony

(Use for Military Personnel) I consider it my duty to advise you that any person subject to the UCMJ who, with intent to deceive, signs any false record, return, regulation, order, or other official document, knowing the same to be false, may be subject to action under the provisions of UCMJ, Art. 107. Additionally, under the provisions of the UCMJ, Art. 134, any person subject to the UCMJ who makes a false statement, oral or written, under oath, believing the statement to be untrue, may also be subject to disciplinary action under the UCMJ. Do you understand?

Print full name ____________________________

Signature ____________________________

Date ___________
CONFIDENTIALITY STATEMENT

In order to protect the confidentiality and rights, privacy, and reputation of all people involved in a Commander, Navy Installations Command (CNIC) Inspector General (IG) fact-finding consultation (inquiry, investigation, or Hotline) I may periodically be consulted by a CNIC IG investigator. I understand that I may not discuss or reveal any matters or aspect of the subject consultation(s) with anyone without permission of the CNIC IG. If someone attempts to gain information specific to my consultation with the investigating officer, I will notify the CNIC IG immediately.

I understand that my identity will be protected from disclosure to the extent possible, consistent with the fact-finding mission of an inquiry/investigation; however, that confidentiality cannot be guaranteed. I understand that disclosure of my identity may be made to competent authority and persons who have a need to know. Acknowledging that withholding consent may hinder the IG fact-finding process and may result in a lack of necessary information, I consent to the disclosure of my identity as necessary to produce a complete and impartial inquiry.

Therefore, I agree to keep confidential all information related to any inquiry/investigation which CNIC IG investigator may address with me. I also understand that this confidentiality agreement remains in effect until I am released from this responsibility by CNIC IG or other competent authority.

PRINT FULL NAME

SIGNATURE

DATE

Failure to adhere to the conditions of this document may result in being charged with a violation of Title 18 United States Code, Section 1512.
Privacy Act Statement

AUTHORITY: Title 10, U.S. Code, Sections 5014 and 5020

PURPOSE: To determine the facts and circumstances surrounding allegations or complaints against Naval personnel and/or Navy/Marine Corps activities. To present findings, conclusions, and recommendations developed from investigations and other inquiries to the Secretary of the Navy, CNO, CMC, or other appropriate Commanders. Disclosure of Social Security Account Number is voluntary, and if requested, is used to further identify the individual providing the information.

ROUTINEUSES: The information is used for the purpose set forth above and may be:

- Forwarded to Federal, State, or local law enforcement agencies for their use;

- Used as a basis for summaries, briefings, or responses to Members of Congress or other agencies in the Executive Branch of the Federal Government;

- Provided to Congress or other Federal, State, and local agencies, when determined necessary.

MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION:

For Military Personnel: Disclosure of personal information is mandatory and failure to do so may subject the individual to disciplinary action.

For Department of the Navy Civilians: Failure to disclose personal information in relation to individual’s position responsibilities may subject the individual to adverse personnel action.

For All Other Personnel: Disclosure of personal information is voluntary and no adverse action can be taken against individuals for refusing to provide information about them.

ACKNOWLEDGMENT
I understand the provisions of the Privacy Act of 1974 as related to me through the foregoing statement.

PRINTED NAME: __________________________

Signature: ________________________________

Date: _________________________________
CONFIDENTIALITY STATEMENT

In order to protect the confidentiality and rights, privacy, and reputation of all people involved in a Commander, Navy Installations Command (CNIC) Inspector General (IG) fact-finding consultation (inquiry, investigation, or Hotline) I may periodically be consulted by a CNIC IG investigator. I understand that I may not discuss or reveal any matters or aspect of the subject consultation(s) with anyone without permission of the CNIC IG. If someone attempts to gain information specific to my consultation with the investigating officer, I will notify the CNIC IG immediately.

I understand that my identity will be protected from disclosure to the extent possible, consistent with the fact-finding mission of an inquiry/investigation; however, that confidentiality cannot be guaranteed. I understand that disclosure of my identity may be made to competent authority and persons who have a need to know. Acknowledging that withholding consent may hinder the IG fact-finding process and may result in a lack of necessary information, I consent to the disclosure of my identity as necessary to produce a complete and impartial inquiry.

Therefore, I agree to keep confidential all information related to any inquiry/investigation which CNIC IG investigator may address with me. I also understand that this confidentiality agreement remains in effect until I am released from this responsibility by CNIC IG or other competent authority.

PRINT FULL NAME

SIGNATURE

DATE 24 May 2016

Failure to adhere to the conditions of this document may result in being charged with a violation of Title 18 United States Code, Section 1512.
Privacy Act Statement

AUTHORITY: Title 10, U.S. Code, Sections 5014 and 5020

PURPOSE: To determine the facts and circumstances surrounding allegations or complaints against Naval personnel and/or Navy/Marine Corps activities. To present findings, conclusions, and recommendations developed from investigations and other inquiries to the Secretary of the Navy, CNO, CMC, or other appropriate Commanders. Disclosure of Social Security Account Number is voluntary, and if requested, is used to further identify the individual providing the information.

ROUTINE USES: The information is used for the purpose set forth above and may be:

- Forwarded to Federal, State, or local law enforcement agencies for their use;

- Used as a basis for summaries, briefings, or responses to Members of Congress or other agencies in the Executive Branch of the Federal Government;

- Provided to Congress or other Federal, State, and local agencies, when determined necessary.

MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION:

For Military Personnel: Disclosure of personal information is mandatory and failure to do so may subject the individual to disciplinary action.

For Department of the Navy Civilians: Failure to disclose personal information in relation to individual’s position responsibilities may subject the individual to adverse personnel action.

For All Other Personnel: Disclosure of personal information is voluntary and no adverse action can be taken against individuals for refusing to provide information about them.

ACKNOWLEDGMENT
I understand the provisions of the Privacy Act of 1974 as related to me through the foregoing statement.

PRINTED NAME: (b) (6)

Signature: (b) (6)

Date: 24 May 2016
Privacy Act Statement

AUTHORITY: Title 10, U.S. Code, Sections 5014 and 5020

PURPOSE: To determine the facts and circumstances surrounding allegations or complaints against Naval personnel and/or Navy/Marine Corps activities. To present findings, conclusions, and recommendations developed from investigations and other inquiries to the Secretary of the Navy, CNO, CMC, or other appropriate Commanders. Disclosure of Social Security Account Number is voluntary, and if requested, is used to further identify the individual providing the information.

ROUTINE USES: The information is used for the purpose set forth above and may be:

- Forwarded to Federal, State, or local law enforcement agencies for their use;
- Used as a basis for summaries, briefings, or responses to Members of Congress or other agencies in the Executive Branch of the Federal Government;
- Provided to Congress or other Federal, State, and local agencies, when determined necessary.

MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION:

For Military Personnel: Disclosure of personal information is mandatory and failure to do so may subject the individual to disciplinary action.

For Department of the Navy Civilians: Failure to disclose personal information in relation to individual’s position responsibilities may subject the individual to adverse personnel action.

For All Other Personnel: Disclosure of personal information is voluntary and no adverse action can be taken against individuals for refusing to provide information about them.

ACKNOWLEDGMENT
I understand the provisions of the Privacy Act of 1974 as related to me through the foregoing statement.

PRINTED NAME: ____________________________
(b) (6)

Signature: ____________________________
(b) (6)

Date: 27 May 16

__________________________
CONFIDENTIALITY STATEMENT

In order to protect the confidentiality and rights, privacy, and reputation of all people involved in a Commander, Navy Installations Command (CNIC) Inspector General (IG) fact-finding consultation (inquiry, investigation, or Hotline) I may periodically be consulted by a CNIC IG investigator. I understand that I may not discuss or reveal any matters or aspect of the subject consultation(s) with anyone without permission of the CNIC IG. If someone attempts to gain information specific to my consultation with the investigating officer, I will notify the CNIC IG immediately.

I understand that my identity will be protected from disclosure to the extent possible, consistent with the fact-finding mission of an inquiry/investigation; however, that confidentiality cannot be guaranteed. I understand that disclosure of my identity may be made to competent authority and persons who have a need to know. Acknowledging that withholding consent may hinder the IG fact-finding process and may result in a lack of necessary information, I consent to the disclosure of my identity as necessary to produce a complete and impartial inquiry.

Therefore, I agree to keep confidential all information related to any inquiry/investigation which CNIC IG investigator may address with me. I also understand that this confidentiality agreement remains in effect until I am released from this responsibility by CNIC IG or other competent authority.

PRINT FULL NAME

SIGNATURE

DATE

Failure to adhere to the conditions of this document may result in being charged with a violation of Title 18 United States Code, Section 1512.

FOR OFFICIAL USE ONLY — PRIVACY SENSITIVE
ANY MISUSE OR UNAUTHORIZED DISCLOSURE MAY RESULT IN BOTH CIVIL AND CRIMINAL PENALTIES
Privacy Act Statement

AUTHORITY: Title 10, U.S. Code, Sections 5014 and 5020

PURPOSE: To determine the facts and circumstances surrounding allegations or complaints against Naval personnel and/or Navy/Marine Corps activities. To present findings, conclusions, and recommendations developed from investigations and other inquiries to the Secretary of the Navy, CNO, CMC, or other appropriate Commanders. Disclosure of Social Security Account Number is voluntary, and if requested, is used to further identify the individual providing the information.

ROUTINE USES: The information is used for the purpose set forth above and may be:

- Forwarded to Federal, State, or local law enforcement agencies for their use;
- Used as a basis for summaries, briefings, or responses to Members of Congress or other agencies in the Executive Branch of the Federal Government;
- Provided to Congress or other Federal, State, and local agencies, when determined necessary.

MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION:

For Military Personnel: Disclosure of personal information is mandatory and failure to do so may subject the individual to disciplinary action.

For Department of the Navy Civilians: Failure to disclose personal information in relation to individual's position responsibilities may subject the individual to adverse personnel action.

For All Other Personnel: Disclosure of personal information is voluntary and no adverse action can be taken against individuals for refusing to provide information about them.

ACKNOWLEDGMENT
I understand the provisions of the Privacy Act of 1974 as related to me through the foregoing statement.

PRINTED NAME

Signature:

Date: 06/11/16
CONFIDENTIALITY STATEMENT

In order to protect the confidentiality and rights, privacy, and reputation of all people involved in a Commander, Navy Installations Command (CNIC) Inspector General (IG) fact-finding consultation (inquiry, investigation, or Hotline) I may periodically be consulted by a CNIC IG investigator. I understand that I may not discuss or reveal any matters or aspect of the subject consultation(s) with anyone without permission of the CNIC IG. If someone attempts to gain information specific to my consultation with the investigating officer, I will notify the CNIC IG immediately.

I understand that my identity will be protected from disclosure to the extent possible, consistent with the fact-finding mission of an inquiry/investigation; however, that confidentiality cannot be guaranteed. I understand that disclosure of my identity may be made to competent authority and persons who have a need to know. Acknowledging that withholding consent may hinder the IG fact-finding process and may result in a lack of necessary information, I consent to the disclosure of my identity as necessary to produce a complete and impartial inquiry.

Therefore, I agree to keep confidential all information related to any inquiry/investigation which CNIC IG investigator may address with me. I also understand that this confidentiality agreement remains in effect until I am released from this responsibility by CNIC IG or other competent authority.

PRINT FULL NAME:

(b)(6)

SIGNATURE:

DATE 6/1/16

Failure to adhere to the conditions of this document may result in being charged with a violation of Title 18 United States Code, Section 1512.
CONFIDENTIALITY STATEMENT

In order to protect the confidentiality and rights, privacy, and reputation of all people involved in a Commander, Navy Installations Command (CNIC) Inspector General (IG) fact-finding consultation (inquiry, investigation, or Hotline) I may periodically be consulted by a CNIC IG investigator. I understand that I may not discuss or reveal any matters or aspect of the subject consultation(s) with anyone without permission of the CNIC IG. If someone attempts to gain information specific to my consultation with the investigating officer, I will notify the CNIC IG immediately.

I understand that my identity will be protected from disclosure to the extent possible, consistent with the fact-finding mission of an inquiry/investigation; however, that confidentiality cannot be guaranteed. I understand that disclosure of my identity may be made to competent authority and persons who have a need to know. Acknowledging that withholding consent may hinder the IG fact-finding process and may result in a lack of necessary information, I consent to the disclosure of my identity as necessary to produce a complete and impartial inquiry.

Therefore, I agree to keep confidential all information related to any inquiry/investigation which CNIC IG investigator may address with me. I also understand that this confidentiality agreement remains in effect until I am released from this responsibility by CNIC IG or other competent authority.

PRINT FULL NAME

SIGNATURE

26 MAY 2015

Failure to adhere to the conditions of this document may result in being charged with a violation of Title 18 United States Code, Section 1512.

FOR OFFICIAL USE ONLY — PRIVACY SENSITIVE
ANY MISUSE OR UNAUTHORIZED DISCLOSURE MAY RESULT IN BOTH CIVIL AND CRIMINAL PENALTIES
Privacy Act Statement

AUTHORITY: Title 10, U.S. Code, Sections 5014 and 5020

PURPOSE: To determine the facts and circumstances surrounding allegations or complaints against Naval personnel and/or Navy/Marine Corps activities. To present findings, conclusions, and recommendations developed from investigations and other inquiries to the Secretary of the Navy, CNO, CMC, or other appropriate Commanders. Disclosure of Social Security Account Number is voluntary, and if requested, is used to further identify the individual providing the information.

ROUTINE USES: The information is used for the purpose set forth above and may be:

- Forwarded to Federal, State, or local law enforcement agencies for their use;

- Used as a basis for summaries, briefings, or responses to Members of Congress or other agencies in the Executive Branch of the Federal Government;

- Provided to Congress or other Federal, State, and local agencies, when determined necessary.

MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION:

For Military Personnel: Disclosure of personal information is mandatory and failure to do so may subject the individual to disciplinary action.

For Department of the Navy Civilians: Failure to disclose personal information in relation to individual's position responsibilities may subject the individual to adverse personnel action.

For All Other Personnel: Disclosure of personal information is voluntary and no adverse action can be taken against individuals for refusing to provide information about them.

ACKNOWLEDGMENT
I understand the provisions of the Privacy Act of 1974 as related to me through the foregoing statement.

PRINTED NAME

Signature:

Date: 24 MAY 2016
Privacy Act Statement

AUTHORITY: Title 10, U.S. Code, Sections 5014 and 5020

PURPOSE: To determine the facts and circumstances surrounding allegations or complaints against Naval personnel and/or Navy/Marine Corps activities. To present findings, conclusions, and recommendations developed from investigations and other inquiries to the Secretary of the Navy, CNO, CMC, or other appropriate Commanders. Disclosure of Social Security Account Number is voluntary, and if requested, is used to further identify the individual providing the information.

ROUTINE USES: The information is used for the purpose set forth above and may be:

- Forwarded to Federal, State, or local law enforcement agencies for their use;

- Used as a basis for summaries, briefings, or responses to Members of Congress or other agencies in the Executive Branch of the Federal Government;

- Provided to Congress or other Federal, State, and local agencies, when determined necessary.

MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION:

For Military Personnel: Disclosure of personal information is mandatory and failure to do so may subject the individual to disciplinary action.

For Department of the Navy Civilians: Failure to disclose personal information in relation to individual’s position responsibilities may subject the individual to adverse personnel action.

For All Other Personnel: Disclosure of personal information is voluntary and no adverse action can be taken against individuals for refusing to provide information about them.

ACKNOWLEDGMENT
I understand the provisions of the Privacy Act of 1974 as related to me through the foregoing statement.

PRINTED NAME:

Signature:

Date:
CONFIDENTIALITY STATEMENT

In order to protect the confidentiality and rights, privacy, and reputation of all people involved in a Commander, Navy Installations Command (CNIC) Inspector General (IG) fact-finding consultation (inquiry, investigation, or Hotline) I may periodically be consulted by a CNIC IG investigator. I understand that I may not discuss or reveal any matters or aspect of the subject consultation(s) with anyone without permission of the CNIC IG. If someone attempts to gain information specific to my consultation with the investigating officer, I will notify the CNIC IG immediately.

I understand that my identity will be protected from disclosure to the extent possible, consistent with the fact-finding mission of an inquiry/investigation; however, that confidentiality cannot be guaranteed. I understand that disclosure of my identity may be made to competent authority and persons who have a need to know. Acknowledging that withholding consent may hinder the IG fact-finding process and may result in a lack of necessary information, I consent to the disclosure of my identity as necessary to produce a complete and impartial inquiry.

Therefore, I agree to keep confidential all information related to any inquiry/investigation which CNIC IG investigator may address with me. I also understand that this confidentiality agreement remains in effect until I am released from this responsibility by CNIC IG or other competent authority.

Failure to adhere to the conditions of this document may result in being charged with a violation of Title 18 United States Code, Section 1512.
CONFIDENTIALITY STATEMENT

In order to protect the confidentiality and rights, privacy, and reputation of all people involved in a Commander, Navy Installations Command (CNIC) Inspector General (IG) fact-finding consultation (inquiry, investigation, or Hotline) I may periodically be consulted by a CNIC IG investigator. I understand that I may not discuss or reveal any matters or aspect of the subject consultation(s) with anyone without permission of the CNIC IG. If someone attempts to gain information specific to my consultation with the investigating officer, I will notify the CNIC IG immediately.

I understand that my identity will be protected from disclosure to the extent possible, consistent with the fact-finding mission of an inquiry/investigation; however, that confidentiality cannot be guaranteed. I understand that disclosure of my identity may be made to competent authority and persons who have a need to know. Acknowledging that withholding consent may hinder the IG fact-finding process and may result in a lack of necessary information, I consent to the disclosure of my identity as necessary to produce a complete and impartial inquiry.

Therefore, I agree to keep confidential all information related to any inquiry/investigation which CNIC IG investigator may address with me. I also understand that this confidentiality agreement remains in effect until I am released from this responsibility by CNIC IG or other competent authority.

PRINT FULL NAME

SIGNATURE

Failure to adhere to the conditions of this document may result in being charged with a violation of Title 18 United States Code, Section 1512.

FOR OFFICIAL USE ONLY – PRIVACY SENSITIVE
ANY MISUSE OR UNAUTHORIZED DISCLOSURE MAY RESULT IN BOTH CIVIL AND CRIMINAL PENALTIES
Privacy Act Statement

AUTHORITY: Title 10, U.S. Code, Sections 5014 and 5020

PURPOSE: To determine the facts and circumstances surrounding allegations or complaints against Naval personnel and/or Navy/Marine Corps activities. To present findings, conclusions, and recommendations developed from investigations and other inquiries to the Secretary of the Navy, CNO, CMC, or other appropriate Commanders. Disclosure of Social Security Account Number is voluntary, and if requested, is used to further identify the individual providing the information.

ROUTINE USES: The information is used for the purpose set forth above and may be:

- Forwarded to Federal, State, or local law enforcement agencies for their use;
- Used as a basis for summaries, briefings, or responses to Members of Congress or other agencies in the Executive Branch of the Federal Government;
- Provided to Congress or other Federal, State, and local agencies, when determined necessary.

MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION:

For Military Personnel: Disclosure of personal information is mandatory and failure to do so may subject the individual to disciplinary action.

For Department of the Navy Civilians: Failure to disclose personal information in relation to individual’s position responsibilities may subject the individual to adverse personnel action.

For All Other Personnel: Disclosure of personal information is voluntary and no adverse action can be taken against individuals for refusing to provide information about them.

ACKNOWLEDGMENT
I understand the provisions of the Privacy Act of 1974 as related to me through the foregoing statement.

PRINTED NAME: ______________

Signature: ______________

Date: 5/22/2016