## NOTICE OF QUALIFICATION FOR PROHIBITION OF FIREARMS, AMMUNITION, AND EXPLOSIVES

PRIVACY ACT STATEMENT: AUTHORITY: 18 U.S.C. § 922(n) and 18 U.S.C. § 922(g); 10 U.S.C. §9013; AFPD 71-1 PURPOSE: To record offender's notice of qualification for prohibition of firearms, ammunition, and explosives, and information pertaining to this prohibition; and to provide the DAF National Instant Criminal Background Check System (NICS) Program Manager with data required for NICS reporting. ROUTINE USES: 1-7 DISCLOSURE IS VOLUNTARY: The disclosure of personal information on this form is voluntary; however, declining to provide this information will not delay reporting of your prohibition(s) to NICS. SYSTEM OF RECORD NOTICE: F036 AF A, Biographical Data and Automated Personnel Management System, 74 FR 4013 AF SORNs are available by number and title at http://dpcld.defense.gov							
I. PERSONAL INFORMATION							
1. Prohibited Person Full Name (Last, First Middle)	2. Date	e of Birth (YYYY/MM/DD)	3. Social Security Number	4. Administrative Male	Gender		
5. Race - Select Only One Black/ African American Asian/Native Hawaiian/ Indian// African American Attack		an Indian/	6. OSI or Security Forces Inves	stigation # (ref. AMJAM	S # for all others)		
II. QUALIFICATIONS FOR FEDERAL FIREAR	RMS I	PROHIBITION(S)					
<ol> <li>Qualification for a federal prohibition marked below permanently prohibit (member's initials required for all marked items below)</li> </ol>	oits the in	dividual from the <u>possession</u> a	nd/or <u>purchase</u> of any firearms,	ammunitions, or explosiv	res.		
Persons who are convicted in a civilian court of a crime punishable by imprisonment over two years), or who have been convicted in General	l Court M	lartial of a crime punishable by	imprisonment for a term excee	ding one year.	Initials		
Persons who are fugitives from justice. Includes deserters who flee to a Must have fled across state lines to qualify. Persons who are adjudicated as a mental defective or who have been in	-				Initials		
other lawful authority (excludes military-directed mental health observ	vation an	d voluntary admissions to men	tal health facilities).	-,	Initials		
Persons who are discharged or dismissed from the US Armed Forces up Persons who, having been citizens of the United States, have renounced		Ū	u characterization.		Initials		
Persons who are aliens and illegally or unlawfully in the United States.		5 cluzensnip.			Initials		
Persons who are convicted in any court of a misdemeanor crime of don		olence.			Initials		
Qualifying Federal/UCMJ Offense(Must provide at least one offense per VICTIM)	Relat	tionship to Victim (Must provide at	least one per offense)				
2. Qualification for a federal prohibition marked below prohibits the individ (member's initials required for all marked items below)	dual from	n possession and/or purchase of	f any firearm, ammunition, or ex	plosive until after the list	ed expiration date.		
Persons who are subject to a qualifying civilian protection/restraining order (CPO). (Note: A military protection order DOES NOT qualify for this prohibition). Date of expiration must match the date of expiration on the corresponding CPO, and a copy of the CPO must be attached to this form.							
Persons whose urinalysis test is positive for drugs not medically authorized/explained by the Medical Review Officer. Date of expiration is Initials							
Persons who make an admission of recent drug use to a law enforcement officer. Recent drug use is defined as use within the past year.							
Persons who are found in possession of a controlled substance, confirmed by field or laboratory test and not medically authorized. NOTE: Initials Initials							
Persons who make an admission of possession of a controlled substance to a law enforcement officer. Date of expiration is one year from							
Persons who, for any drug offense, are criminally convicted at Special Court Martial, found guilty at Summary Court Martial, receive nonjudicial punishment, or are administratively discharged/dismissed in lieu of Court Martial. (For civilian and General Court Martial convictions, see Section II, Subsection 1.) Date of expiration is one year from date of conviction or date other listed action is completed.							
3. Qualification for the federal prohibition marked below prohibits the individual from the purchase of any firearm, ammunition, or explosive until after the listed expiration date. This qualification <i>does not prohibit possession</i> of firearms, ammunition, or explosives the person already possesses. <b>NOTE:</b> When this prohibition applies, and the person is not <i>also</i> prohibited from possession for additional qualifications under Section II, Subsection 1 and/or 2, military commanders may exercise their authorities under MCM 2019, Pt IV, 16.c(2)(a)(iv); NDAA 2011, Sec. 1062; and/or DODI 6490.16 and arrange for safekeeping of such firearms, if deemed necessary for the safety and protection of the prohibited person and/or others. Commanders should consult with their servicing SJA for guidance.							
Persons who are under indictment or information (includes referral of charges to General Court Martial under Art. 32 UCMJ) for a crime punishable by imprisonment for a term exceeding one year. Date of expiration is the scheduled trial date or twelve months from the date of indictment/information/referral of charges, whichever is soonest. Expiration date will be extended if trial is delayed or rescheduled.							
III. GOVERNMENT OFFICIAL PROVIDING N	OTIF	TICATION					
1. Name (Last, First MI)	1	2. Signature		3. Date			

IV.	ACKNOWL	LEDGEMENT	<b>OF NOTIFI</b>	CATION

	nd Acknowledgment								
Initials	I,	, Grade/Rank ,	Branch	-,	,				
	acknowledge notification of my qualification for at least one prohibition identified in Section II.								
Initials	I understand I am prohibited from purchasing any firearms, ammunition, or explosives based on my prohibition(s) identified in Section II.								
Initials	I understand that, if I met prohibitions prescribed in Section II, Subsections 1 and/or 2, and I am also prohibited from the possession of firearms, ammunition, or explosives, including any firearms, ammunition, or explosives I already own, those that may be given or loaned to me, or any government-issued firearms, ammunitions, or explosives.								
Initials	I understand that, if I met prohibitions prescribed in Section II, Subsections 1 and/or 2, and I 1) maintain possession of any firearms, ammunition, or explosives currently in my possession, 2) if I obtain such items from any source, 3) and/or if I falsify documentation regarding my prohibited status identified in Section II to purchase these items from which I am prohibited, I am knowingly violating provisions set forth in 18 U.S.C. § 922(g), which is punishable by up to 10 years in prison for each prohibited item in my possession. I may also be charged with other related offenses.								
Initials	I understand that, if I met prohibitions — ammunition, or explosives (to include a - Contact my commander to - Contact my local civilian la - Contact my local ATF offic - Contact a local firearms dea - Complete a legal transfer of	turn over the prohibited ite w enforcement agency to a and turn over the prohibited agency to be and turn over the prohibited aler to conduct a legal trans	chicle(s), or in my reside ms urn over the prohibited ited items sfer of firearms	nce(s)), I must complete one of t	•				
2. Order to Di	vest Prohibited Items (for persons prohibited	d under Section II. Subsect	ion 1 and/or 2 only)						
providing n	reby ordered to divest yourself of a otification has directed you to acco nent official who issued this notific	omplish compliance, o							
3. Prohibited Ir	ndividual Full Name (Last, First Middle)	4. Signature		5. Date of No.	otification				
		. Signature							
I certify I an explosives f by me herein grounds for disciplinary or Supervise	LIANCE CERTIFICATION n not in possession of any firearms, am or the duration of my prohibition perior n is true, and I acknowledge that <b>this is</b> criminal and/or administrative proceed action under the Uniform Code of Mili or should I meet additional qualifiers pr dividual Full Name (Last, First Middle)	d. I hereby certify that, an official statement. lings, to include (if civil itary Justice. I further u	to the best of my kno I understand that fals ian) adverse action up nderstand that I have	wledge and belief, all of the i e or fraudulent information p o to and including removal, ar a continuing obligation to inf imunition, and explosives in	nformation provided rovided herein may be id (if military) form my Commander				
<ol> <li>Prohibited In</li> </ol>	dıvıdual Full Name (Last, First Middle)	2. Signature		3. Date of Co	ompliance Certification				
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