



Reporting Actions and Activities for HHS Employees, Contractors and Affiliates

When self-reporting or reporting for personal and/or official travel about others when necessary, the following information must be provided in the report, as available and applicable. When completed, please email this form to PersonnelSecurity@hhs.gov and International@hhs.gov. This requirement is for individuals that currently hold national security clearances and sensitive positions per SEAD 3 requirements. Please see Page 5 for additional information and the link to the Office of the Director of National Intelligence (ODNI). **Annotate N/A as required or when unknown.**

This reporting is for (please select one) <input type="checkbox"/> Self <input type="checkbox"/> Other	Full Name	STAFFDIV/OPDIV

Foreign Travel

Country or Countries Visited

Dates of Travel

Mode of Transportation and Identity of Carriers	Passport Data

Names and Association (*Business, Friend, Relative, etc.*) of Foreign National Traveling Companions

If You are Reporting Regarding Someone Else, Please Provide the Name of the Individual You are Reporting on

Name	STAFFDIV/OPDIV
Telephone Number	Relationship

Unofficial Contacts with a Known or Suspected Foreign Intelligence Entity(ies)

Service(s) Involved	Name of Individual(s) Contacted	
Date(s) of Contact	Nature of Contact(s) to Include Any Unusual or Suspicious Activity	Likelihood of Future Contacts

Continuing Association with a Known Foreign National(s) or Foreign National Roommate(s)

Name of Foreign National(s)	Citizenship(s)	Occupation(s)
Nature of Relationship(s) (<i>business or personal</i>)		Duration and Frequency of Contact(s)
Current Status of Relationship(s)		

Involvement in Foreign Business(s)

Nature of Involvement(s)

Country(ies) Involved

Name of Business(es)

Foreign Bank Account(s)

Financial Institution(s)

Country(ies)

Ownership of Foreign Property(ies)

Location(s)

Estimated Value(s)

Balance(s) Due

Purpose and Use of Property(ies)

How Acquired

Foreign Citizenship

Country

Basis for Citizenship

Date of Application or Receipt

Application for Foreign Passport or Identity Card for Travel

Country

Date of Application

Reason for Application

Possession of a Foreign Passport or Identity Card for Travel

Issuing Country

Number

Date of Issuance

Expiration Date

Reason for Possession

Use of Foreign Passport or Identity Card for Travel

Issuing Country(ies)

Reason for Use

Date(s) and Country(ies) of Use

Voting in foreign election

Date

Country

Election

Adoption of non-U.S. citizen children(s)

Country(ies) Involved	Foreign Government Organization(s) Involved
Foreign Travel(s) Required	Adoption Agency or Other Intermediary(ies)
Adoptive Parents' Current Linkage(s) to Foreign Country(ies)	

Attempted Elicitation, Exploitation, Blackmail, Coercion, or Enticement to Obtain Classified Information or Other Information Specifically Prohibited by Law from Disclosure

Date(s) of Incident	Name of Individual(s) Involved	
Nature of Incident	Method(s) of Contact	
Electronic Address(es)		
Type of Information Being Sought		
Background, Circumstances, and Current State of the Matter		

Media contacts

Date(s) of Contact	Name of Media Outlet(s)
Name of Media Representative(s)	Nature and Purpose of Contact(s)
Whether Classified Information or Other Information Specifically Prohibited by Law from Disclosure was Involved in the Contact	
Current Status of the Contact	

Arrests

Date(s) of Incident(s)	Location(s) of the Incident(s)	
Charges and/or Circumstances	Disposition	

Financial Issues and Anomalies

Type of Issue or Anomaly (*bankruptcy, inheritance, etc.*)

Dollar Value(s)

Reason(s)

Cohabitant(s)

Name(s)

Citizenship(s)

Date(s) of Birth

Duration of Contact(s)

Marriage(s)

Name of spouse(s)

Citizenship of spouse(s)

Date(s) of Birth

Place(s) of Birth

Date(s) of Marriage

Alcohol and Drug-Related Treatment(s)

Reason(s)

Treatment Provider(s), to Include Contact Information

Date(s) Treatment Provided

Employee Printed Full Name

Organization

Authorities, purpose, and applicability can be found by selecting the link below:

<https://www.dni.gov> or see below.

Additional Comments

Signature of Employee

Date of Submission

SEAD 3 Reporting Requirements for Personnel with Access to Classified Information or Who Hold a Sensitive Position

AUTHORITY: The National Security Act of 1947, as amended; Intelligence Reform and Terrorism Prevention Act of 2004, as amended; Executive Order (EO-13764), as amended; EO 12968, *Access to Classified Information*, as amended; EO 13467, as amended *Reforming Processes Related to Suitability for Government Employment, Fitness for Contractor Employees, and Eligibility for Access to Classified National Security Information*; EO 13549, *Classified National Security Information Program for State, Local, Tribal and Private Sector Entities*; Presidential Decision Directive/NSC-12, *Security Awareness and Reporting of Foreign Contacts*; Performance Accountability Council memorandum, *Assignment of Functions Relating to Coverage of Contractor Employee Fitness in the Federal Investigative Standards*, 6 December 2012; and other applicable provisions of law.

PURPOSE: This Security Executive Agent (SecEA) Directive establishes reporting requirements for all covered individuals who have access to classified information or hold a sensitive position. Nothing in this Directive should be construed to limit the authority of agency heads to impose additional reporting requirements in accordance with their respective authorities under law or regulation.

APPLICABILITY: This Directive applies to any executive branch agency or covered individual with access to classified information or who hold a sensitive position.

SECURITY MANAGER DATABASE: All forms collected will be maintained in the Personnel Security database, Security Manager, which is owned and operated by the Office of National Security (ONS) with limited access for HHS security staff only. Additionally, Security Manager is a Federal government approved security management database for storing personal identifiable information (PII) and other sensitive information. All foreign contact(s), foreign travel, and other reporting requirements are collected per SEAD 3 requirements. Generally, you would report this information during your *initial background investigation or periodic reinvestigation*. However, per SEAD 3 requirements, the information is required as it is obtained. **Please note that for foreign contact reporting, you are required to report your *initial* contact (described as close and continuing or sharing of personal information). After you report your *initial* foreign contact, you are required to update your foreign contact information when the frequency of contact changes i.e., increase, decrease or cease.**

PRIVACY IMPACT ASSESSMENT (PIA): Please contact HHSCybersecurityPolicy@hhs.gov for questions regarding the Privacy Impact Assessment (PIA) on file. Security Manager PIA - P-6740463-967309.

SYSTEM OF RECORDS NOTICES (SORN): To learn more about the SORN for the Security Manager database, please refer to [SORNs_09-90-0777](#) - Facility & Resource Access Ctrl Records and [09-90-0020](#) - Suitability for Employment Records.