

**Instructions:**

1. PRINT legibly, use BLACK INK --- stay inside the boxes
2. VERIFY Header information is complete and correct
3. Complete Badge No. field at bottom; Sign & Date

Index No. PX-3864-UNC  
 Page No. 1 of 1  
 Issue No. 020



**Training Completion Report**

(Ref. WI 02.03.02.03.03. WI 02.03.02.03.05, WI 02.03.02.03.06)

Employee Name \_\_\_\_\_

Badge No.

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OR

LMS No.

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Item Name

Annual Security Refresher  
 (Cleared Subcontractors)

Item No.

		6	6	.	0	9
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Item Type

S	T
---	---

Item Revision Date

0	8	2	0	1	5
<small>M</small>	<small>M</small>	<small>D</small>	<small>D</small>	<small>Y</small>	<small>Y</small>

Test Version

1	5	0	8	1
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Instructor Badge No.

9	9	9	9	9
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Score

--	--	--

Complete

<small>Y</small>	<small>N</small>

RIDS

B
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Workflow Route No.

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TSR-Related?

	X
<small>Y</small>	<small>N</small>

1. Using Black or Blue ink, fill out the following areas of this page:

- a. Employee Name (Top)
- b. Badge No. (Top)
- c. Badge No. (Bottom)
- d. Employee Signature (Bottom)
- e. Training Completion Date (Bottom)

2. Mail this form to one of the two addresses below:

a. **U.S. Mail**

Pantex Plant  
 Attn: Sylvia Lovelett  
 P.O. Box 30020  
 Amarillo, TX. 79120-0020

b. **FEDEX/UPS**

Pantex Plant  
 Attn: Sylvia Lovelett  
 US Hwy 60 & FM 2373  
 Amarillo, TX. 79120

**NOTICE!** Failure to complete the annual refresher briefings by an individual who holds a security clearance may result in administrative actions determined by the Safeguards & Security Director, including possible administrative termination of the security clearance.

This E-Learning course and the PX-3864 Training Completion Report MUST be completed and filled out and mailed back to Pantex prior to your next visit, or you will not be granted access to the plant-site.

**ACKNOWLEDGMENT**

*By signing and returning this report,  
 I acknowledge having been provided training or information.*

*I acknowledge that it is my responsibility to know and comply with  
 the information presented. If I do not understand the information,  
 it is my responsibility to ask for clarification.*

Badge No. (or LMS No.)

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Employee Signature

\_\_\_\_\_

Training Completion Date

<small>M</small>	<small>M</small>	<small>D</small>	<small>D</small>	<small>Y</small>	<small>Y</small>