

NATA CS Order Form

Rev. 20241030

Effective September 9, 2024

SECT	ION A: COM	IPANY I	NFORMATIO	N								Elle	Cliv	e Septe	ember 9	, 2024
Company Name							١	NATA C	S Clier	nt ID:						
Stree	et Address															
City							State					Zip				
Com	pany Admin	Name						Title	.							
Ema	il								Ph	none nu	mber					
SECT	ION B: EMP	LOYEE	/ APPLICAN	T INFORM	ATION											
First	Name			Las	st Name						Midd	le Name	е			
Stree	et Address															
City					•		State									
Zip C	Code				Country o	f Reside	ence									
Date	of Birth				Social Se	curity N	umber*									
SECT	TION C: BAC	CKGRO	UND CHECK	SERVICES	3											
	FAA Pilot Records Database Records Retrieval (per employee)**						\$9	9.95								
FAA Pilot Records Database Historical Record Entry Enrollment - AirDock DOT & FAA Database non-subscribers (per employee)					\$9	9.95										
FAA Pilot Records Database New Record		w Record E	Entry (per page)**						\$5.00		5.00					
	FAA Pilot Records Database Historical Record Entry Enrollment - AirDock DOT & FAA Database subscribers (per employee)						\$6	9.95								
	National D	river Re	gister Check (NDR)											\$4	9.95
$\overline{\Box}$	Drug & Alcohol History Records Request (per employer)						\$5	9.95								
DASSP Airman File Check						\$5	9.95									
ī	Motor Vehicle Driving Record Check ^{1 & 2}						\$3	2.95								
			cense Check												\$2	9.95
	FAA Accid	lent, Inci	dent and Enfo	rcement (A	NE) Report										\$5	9.95
	U.S. Employment Verification (per employer) ^{1 & 2}								\$2	1.95						

^{*} If employee is already in the NATA CS platform, only the last four digits of the SSN are required.

^{**} AirDock DOT & FAA Database subscription pricing applies.

¹ A \$25.90 application-processing fee will be charged for web-enabled services per employee/applicant.

² Direct pass-through expenses shall be invoiced.
If submitting by email, please send to services@natacs.aero.



ORDER FORM FAA PILOT RECORDS DATABASE (PRD) – PILOT RECORDS REQUEST

Employer:	Employee Full Name:	
	Airmen Certificate Number:	

PILOT RECORDS DATABASE REGISTRATION & CONSENT:

Ensure the steps outlined below have been completed

Step 1: Complete your registration as a pilot user for the Pilot Records Database (PRD)

If you have already completed this step, move to step 2. If you have not completed your registration as a pilot user for the Pilot Records Database (PRD), please follow the steps lined out on the attached document titled "PRD First Time User Registration".

Step 2: Grant consent to this aircraft operator to view your records within the Pilot Records Database (PRD)

If you have already completed this step, no further action is needed. If you not granted consent to this aircraft operator to view your records within the Pilot Records Database (PRD), please follow the steps lined out on the attached document titled "How to release your pilot records to a potential employer using the Pilot Records Database (PRD)".

If you have questions about the PRD or need technical assistance, please email the PRD support office at <u>9-amc-avs-PRDSupport@faa.gov</u>

Rev 1 20240822

PRD First Time User Registration



The purpose of this document provides guidance on how to gain access to the FAA's Internal Network.

Table of ContentsGetting Started1First Time User Registration1If You Do Not Have an FAA User Account2If You Have an FAA User Account2First Time Register For Roles4Support and Resources6

Getting Started

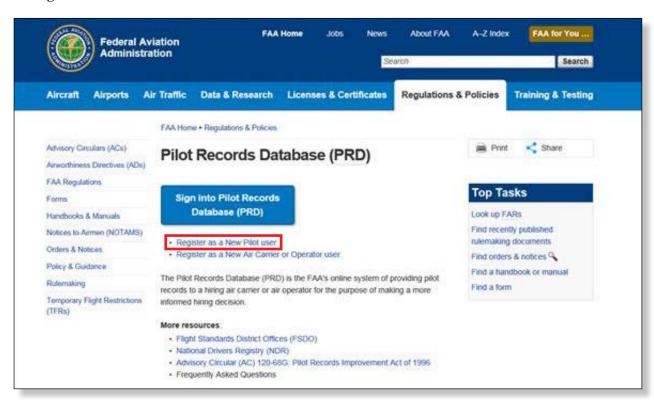


Note: Users must have a FAA MyAccess account in order to log into the PRD application. FAA MyAccess manages user IDs and security questions to control access. In addition, external users must go through an initial registration and approval process to be accorded an active role within the PRD External application. For help with External MyAccess procedure please see the corresponding Job Aid.

First Time User Registration

To submit a PRD External application registration request complete the following steps.

- 1) From your web browser please type https://www.prd.faa.gov.
- 2) Select "Register as a New Pilot User".



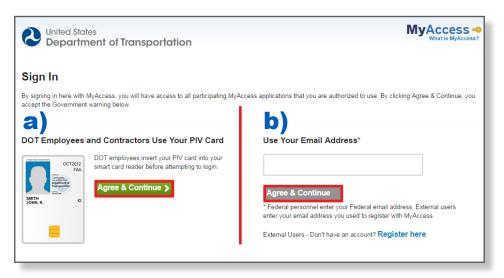
If You Do Not Have an FAA User Account



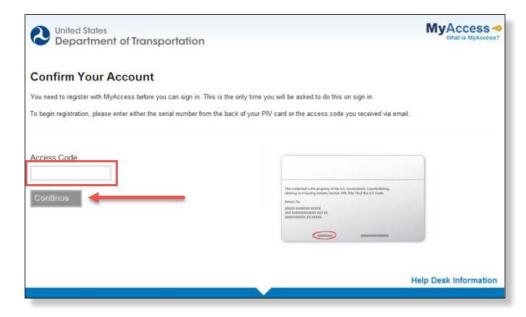
Note: If you do not have a FAA MyAccess user account, follow the procedure in the External MyAccess Job Aid.

If You Have an FAA User Account

- 3) MyAccess page will appear.
 - a) For FAA Employees who have a PIV card, click "Agree & Continue" on the left side.
 - b) For external users, enter the email address that you gave when setting up your External MyAccess then click "Agree and Continue" on the right side.



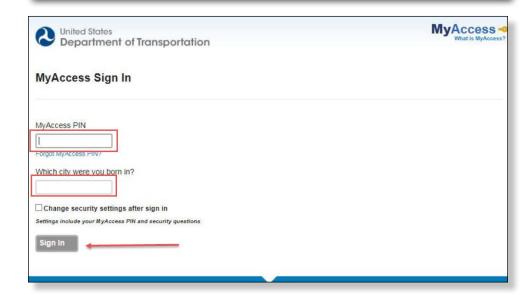
- 4) Confirm your account.
 - a) For FAA Employees that have a PIV card, select "Continue".
 - b) For external users enter the temporary access code provided to you in the email you received and click "Continue".



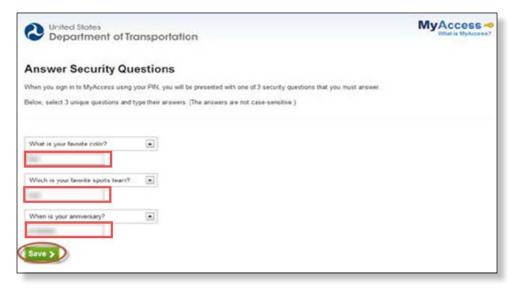
5) Create a MyAccess PIN number by entering a 6-8 digit number. Confirm your MyAccess PIN number by re-entering it, and clicking "Continue."



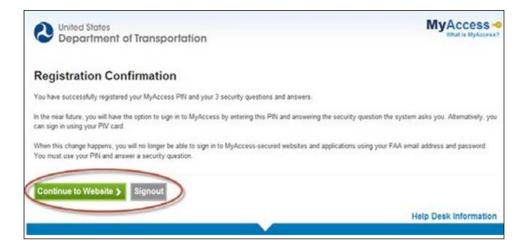
Note: Your MyAccess PIN Number <u>CAN</u> be the same as your PIV Card PIN number. <u>However</u>, your MyAccess PIN number is not associated with your PIV Card PIN number.



6) Select a Security Question from each of the drop-down boxes and provide an answer to each question. Click "Save" to proceed.



7) Once the information you provide is validated, you will receive the following confirmation. Select "Continue to Website" to proceed.



First Time Register For Roles

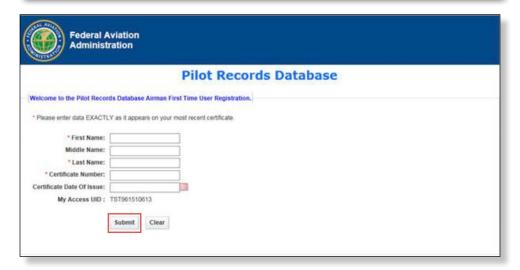


Note: First time users need to register and sign up for roles. There are two roles: one for Airmen and one for Air Carriers. Below is what will appear on the screen during this process.

1) Enter your First Name, Middle Name, Last Name, Certificate Number and Certificate Date of Issue <u>EXACTLY</u> as they appear on your most recent certificate. Click the "**Submit**" button.



Note: Your FAA Access ID is displayed as Read Only.



2) The next page is displayed if the credentials entered are validated against the data in the Comprehensive Airman Information System (CAIS) database.



Note: If the Pilot record is not found, a message is displayed indicating that the data cannot be validated, please try again.

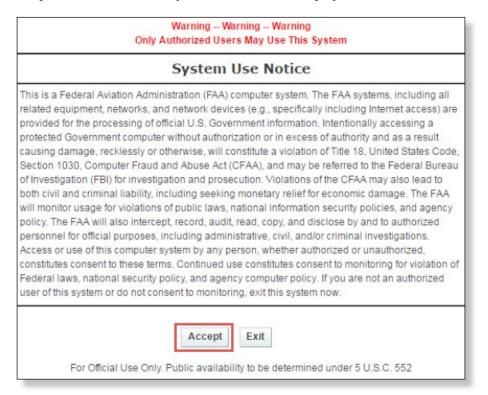
3) Several fields on this page will be auto-populated based on the entries and the data in the CAIS database. Enter your phone number, mobile number, and fax number in the appropriate fields. Select "Submit".



Note: Only your primary phone number and email address are required. The email address that is entered will be the one used for all notifications from the PRD application.



4) If your registration data passes validation, the System Use Notice is displayed.



- 5) You must read the Notice and select the **Accept** button to proceed.
- 6) You have now completed the First time Pilot User Registration and ready to log into the PRD.

Support and Resources

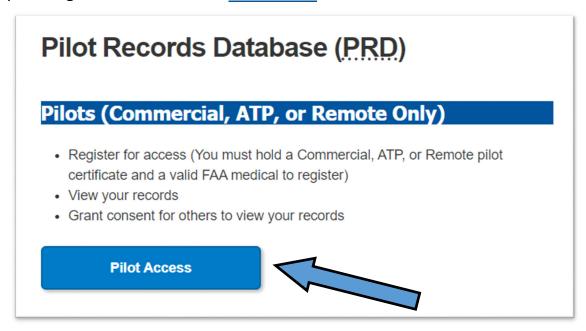


(844) FAA-MYIT (844) (322-6948) helpdesk@FAA.gov MyIT.faa.gov



How to release your pilot records to a potential employer using the Pilot Records Database (PRD)

1) Visit prd.faa.gov and click on the "Pilot Access" button.



- 2) Login via your MyAccess account or <u>create a new one</u> if you don't already have one. (See the Note at the end of this guide.)
- 3) Register in PRD if you have not already done so. Be sure to enter your *PILOT* certificate number and date of issuance; not any other certificate such as CFI. (See the Note at the end of this guide.)
- 4) Once in the PRD, you can review the information contained in the PRD for you.
- 5) Click on the "Experience" option from the menu bar.



- 6) Enter your current and/or former employers for which you were employed as a pilot within the previous five years, at a minimum. Select an employer from the Employer list and if not found, click the "Add New Employer" button to manually enter the employer.
- 7) Click the "Consent" option from the menu bar.
- 8) Start typing the name of the employer and select it from the list when it appears. Be careful to enter the correct name. If not sure, ask the employer what to select.

9) Specify how many days to release the records then press "Grant Consent". Let the employer know the records are available via the PRD.

Note: If you cannot access the PRD to grant consent for any reason, submit a <u>FAA Form</u> 8060-14 to grant consent to the employer.

Support questions can be sent to PRDsupport@faa.gov.



Drug and Alcohol History Check (ref: 49 CFR Part 40.25b)
This section requires DOT-regulated operator to check the record of the new employees who were previously employed by a company subject to DOT regulations.

Part

Section I: To be completed & signed by the employee/applicant

	PART I
I. EMPLOYEE/APPLICANT:	
Employee Printed or Typed Name	Employee Social Security Number
I have been employed by one (or more) DOT-re	regulated company and subject to DOT regulations within the last 2 years. (Check one.)
	Yes No
If "Yes", provide name(s) of DOT-Regulated	employer(s) and complete the attached release form for each DOT-regulated compan
DOT-Regulated Er	mployer:
DOT-Regulated E	mployer:
which I have applied for, but did not obtain, sa testing rules during the past two years. (Check	Yes No
If "Yes", provide name of Substance Abuse P	
	Address: City, State, Zip:
	Phone:
	Fax:
imployee/Applicant Signature	Date



Rev. 20240903

(49 CFR 40.25)

- in accordance with 49 CFR § 40.25 employers are required to request records from DOT-regulated companies where the employee worked in the previous two years.
- Part I To be completed by the employer and signed by the employee-applicant
- Part II To be completed by the previous employer

	~	Part I ~
I authorize my previous emplo	ovor	at
r authorize my previous empir	(Company Name)	at, (Street Address)
	,, ,, ,,	to release my U.S. Department of Transportation drug and
(City)	(State) (Zip code	,
	/o NATA Compliance Services ignated Employee Representative)	at +1.866.768.2881, (Fax No.)
On behalf of	g,	(3,
(New Employer Nam	ne)	(Air Carrier Certificate #)
is limited to the below DOT di	ug and alcohol testing items:	DOT 49 CFR Part 40 §40.25 and FAA regulation 14 CFR Part 120; and
1. Alcohol tests with a result2. Verified positive drug test3. Refusals to be tested	-	
	gency drug and alcohol testing re	pulations
	previous employers of a drug & a	
6. Documentation, if any, of	completion of the return-to-duty p	ocess following a rule violation
Employee-Applicant Name (F	Please Print):	
Employee-Applicant Signatur	e:	Date:
	~ 1	Part II ~
To be completed by the pre Part II-A. While employed	vious employer	
Yes No	1. Did the employee have alcoho	tests with a result of 0.04 or higher?
Yes No	2. Did the employee have verified	positive drug tests?
Yes No	3. Did the employee refuse to be	tested?
Yes No	4. Did the employee have other v	iolations of DOT agency drug & alcohol testing regulations?
Yes No	5. Did a previous employer or the	employee report a drug and alcohol rule violation to you?
	6. If you answered "yes" to any o process?	the above items, did the employee complete the return-to-duty
-	s" to any of the above question nentation (e.g., SAP report(s), fo	s, you must provide the records concerning the result, violation ollow-up testing results, etc.).
Part II-B. Name and title of	person providing information in 11	A:
Name of Designated Employ	er Representative:	Title:



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	,, ,	to release my U.S. Department of Transportation drug and
(City)	(State) (Zip code)	4 000 700 0004
alcohol testing records to <u>C/O</u>	nated Employee Representative)	at +1.866.768.2881, (Fax No.)
On behalf of		(
(New Employer Name)		(Air Carrier Certificate #)
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4. Other violations of DOT age	ency drug and alcohol testing regula	ations
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6. Documentation, if any, of co	empletion of the return-to-duty proc	ess following a rule violation
Employee-Applicant Name (Ple	ase Print):	
Employee-Applicant Signature:		Date:
	~ Pa	rt II ~
To be completed by the previ	ous employer	
Part II-A. While employed		
	Did the employee have alcohol te	sts with a result of 0.04 or higher?
Yes No 1.	Did the employee have alcohol te	-
Yes No 1. Yes No 2.		sitive drug tests?
Yes No 1. Yes No 2. Yes No 3.	Did the employee have verified po	sitive drug tests?
Yes No 1. Yes No 2. Yes No 3. Yes No 4.	Did the employee have verified por Did the employee refuse to be test Did the employee have other violation	sitive drug tests? ted?
Yes No 1. Yes No 2. Yes No 3. Yes No 4. Yes No 5. Yes No N/A 6.	Did the employee have verified por Did the employee refuse to be test Did the employee have other violation Did a previous employer or the employer	ted? tions of DOT agency drug & alcohol testing regulations?
Yes No 1. Yes No 2. Yes No 3. Yes No 4. Yes No 5. Yes No N/A 6. pr NOTE: If you answered "yes"	Did the employee have verified por Did the employee refuse to be test Did the employee have other violation Did a previous employer or the entry of the gray of the cocess?	sitive drug tests? ted? tions of DOT agency drug & alcohol testing regulations? nployee report a drug and alcohol rule violation to you? e above items, did the employee complete the return-to-duty ou must provide the records concerning the result, violation
Yes No 1. Yes No 2. Yes No 3. Yes No 4. Yes No No 5. Yes No No N/A 6. pr NOTE: If you answered "yes" and/or return-to-duty docume	Did the employee have verified por Did the employee refuse to be test Did the employee have other violated Did a previous employer or the end of you answered "yes" to any of the cocess?	sitive drug tests? ted? tions of DOT agency drug & alcohol testing regulations? nployee report a drug and alcohol rule violation to you? e above items, did the employee complete the return-to-duty ou must provide the records concerning the result, violation
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r authorize my previous empir	(Company Name)	at, (Street Address)
	,, ,, ,,	to release my U.S. Department of Transportation drug and
(City)	(State) (Zip code	,
	/o NATA Compliance Services ignated Employee Representative)	at +1.866.768.2881, (Fax No.)
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	previous employers of a drug & a	
6. Documentation, if any, of	completion of the return-to-duty p	ocess following a rule violation
Employee-Applicant Name (F	Please Print):	
Employee-Applicant Signatur	e:	Date:
	~ 1	Part II ~
To be completed by the pre Part II-A. While employed	vious employer	
Yes No	1. Did the employee have alcoho	tests with a result of 0.04 or higher?
Yes No	2. Did the employee have verified	positive drug tests?
Yes No	3. Did the employee refuse to be	tested?
Yes No	4. Did the employee have other v	iolations of DOT agency drug & alcohol testing regulations?
Yes No	5. Did a previous employer or the	employee report a drug and alcohol rule violation to you?
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	previous employers of a drug & a	
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Employee-Applicant Signatur	e:	Date:
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Yes No	4. Did the employee have other v	iolations of DOT agency drug & alcohol testing regulations?
Yes No	5. Did a previous employer or the	employee report a drug and alcohol rule violation to you?
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To be completed by the previ	ous employer	
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	Did the employee have alcohol te	sts with a result of 0.04 or higher?
Yes No 1.	Did the employee have alcohol te	-
Yes No 1. Yes No 2.		sitive drug tests?
Yes No 1. Yes No 2. Yes No 3.	Did the employee have verified po	sitive drug tests?
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Request For National Driver Register (NDR) File Check on Current or Prospective Employee

ACCOUNT #

48267

Rev. 20240925

Instructions:

1. All portions of this form must be filled out completely and legibly. 2. This form must be signed and notarized unless you have a valid DMV Record Inquiry Account that is qualified to receive personal information. 3. Mail this form to: DMV, 1905 Lana Av. Salem OR 97314.

4. Pursuant to Section 502 of the Pilot Improvement Act of 1996, if you are seeking employment with an air carrier as a pilot, this serves as a notice of a request for NDR information concerning your driving record and your right to a copy of such information. 5. This file check of the NDR will result in a printed report that will be sent only to the employer listed on this form. The report will indicate either (1) that the NDR does not contain a record matching your identification or (2) that the NDR has a probable identification (match) from the state(s) listed on the report. 6. A separate check of state files is required to (1) verify the identification or (2) obtain the driving record. It is the responsibility of the employer to obtain the state driver record(s) and to determine or verify that the record(s) belong to the employee.

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Current or Prospective Er	nployer to Receive the NDR Search Results
OYER OR AGENCY NAME C/O NATA Compliance Services	Driver Employer Railroad Company X Air Carrier
E SPECIFIC ATTENTION OF:	SUBSCRIBER TELEPHONE (703) 842-5317
ig address: NUMBER AND STREET 400 Gateway Dr. Suite D	FAX (866) 768-2881
STATE AND ZIP CODE Peno, NV 89521	
	Driver Information
R'S (EMPLOYEE OR PROSPECTIVE EMPLOYEE) FULL LEGAL	L NAME (FIRST, MIDDLE AND LAST
R NAMES USED (MAIDEN, PRIOR NAME, NICKNAME, PROFES	SSIONAL NAME, OTHER
R LICENSE NUMBER AND STATE	
DF BIRTH (MONTH - DAY - YEAR)	
	National Driver Register (NDR) search will result in a printed report which will be form. Under the Privacy Act, I have the right to request record(s) pertaining to me
cations or interviews, I might not be hired as a drive	pensions or revocations of mine are found which I have not shown on my er or could lose my job as a driver, and the State where I am licensed may also cancellation or revocation. I hereby, with my signature, authorize a one-time file to the employer or agency named on this form.
R'S SIGNATURE (EMPLOYEE OR PROSPECTIVE EMPLOYEE)	DATE
State of County of This instrument was acknowledged before me on by	
	C/O NATA Compliance Services E SPECIFIC ATTENTION OF: G ADDRESS: NUMBER AND STREET 400 Gateway Dr. Suite D STATE AND ZIP CODE eno, NV 89521 R'S (EMPLOYEE OR PROSPECTIVE EMPLOYEE) FULL LEGAL R NAMES USED (MAIDEN, PRIOR NAME, NICKNAME, PROFES R LICENSE NUMBER AND STATE OF BIRTH (MONTH - DAY - YEAR) LOYEE UNDERSTANDING: I understand that the only to the employer or agency listed above on this the NDR. I also understand that if convictions, suspections or interviews, I might not be hired as a drivent action on my driver license including suspension, of the NDR and any resulting reports to be sent. R'S SIGNATURE (EMPLOYEE OR PROSPECTIVE EMPLOYEE) State of County of This instrument was acknowledged before me on

Notary Public - State of