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**Afghanistan BHA Consortium**

**Annex J – Vetting Portal Information Form**

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| **PART 4: KEY INDIVIDUAL INFORMATION** | | |
| Name Listed on Government-Issued Photo ID (Last, First, Middle Initial)\* |  | Place of Birth\* |
|  |  |  |
| Other Names Used (Also known as, nicknames, alias, different spelling)\* |  | Date of Birth (mm-dd-yyyy)\* |
|  |  |  |
| Citizenship(s) (If dual citizen, list both countries)\* |  | Gender |
|  |  |  |
|  |  |  |
| U.S. Citizen or Permanent Resident?\* Yes/ No |  | Government-Issued Photo ID Type\* |
|  |  |  |
| If yes, U.S. Passport/Permanent Resident Card Number: |  | Government-Issued Photo ID Number\* |
|  |  |  |
| Address of Residence |  | ID Country of Issuance\* |
|  |  |  |
| Province/Region |  | Government-Issued Photo ID Type [complete for dual citizens only] |
|  |  |  |
| Primary Phone Number\* Is this a cell phone number? Yes/ No |  | Government-Issued Photo ID Number [complete for dual citizens only] |
|  |  |  |
| Alternate Phone Number Is this a cell phone number? Yes/ No |  | ID Country of Issuance [complete for dual citizens only] |
|  |  |  |
| Primary Email Address\* |  | Tribal Affiliation (if applicable) |
|  |  |  |
| Alternate Email Address |  | Occupation |
|  |  |  |
| Current Employer and Project Title\* |  | Organizational Rank or Title\* |
|  |  |  |
|  |  |  |

*NB. This form is subject to revision by USAID. Updates will be issued as necessary when made available.*