REGISTERING A REAL ID ACT COMPLIANT IDENTIFICATION WITH DBIDS (New State Employees):

Go to DBIDS pre-enrollment page at https://dbids-global-enroll.dmdc.mil/preenrollui/#!/

Fill out all requested information. Please use full legal name. Only primary identifier is required; for most people this will be their Social Security Number.

irst	Middle	Last		Suffix
John	Q	McClane		Select Suffix 👻
ate of Birth onth Date	Year	Origin Country of Birth	Citizen	ship
December 👻 25	✔ 1965	United States	✓ Unit	ed States 🗸
	Primary Identifier Type SSN	Value 111223333		
	Secondary Identifier Type	Value	× Remove	
	ID Type 🗸 🗸	ID Number		
		Add Identifier		

Demographic information is not required, but it does assist with the vetting process.	For job title,
please use actual job duty title rather than the State grading system.	

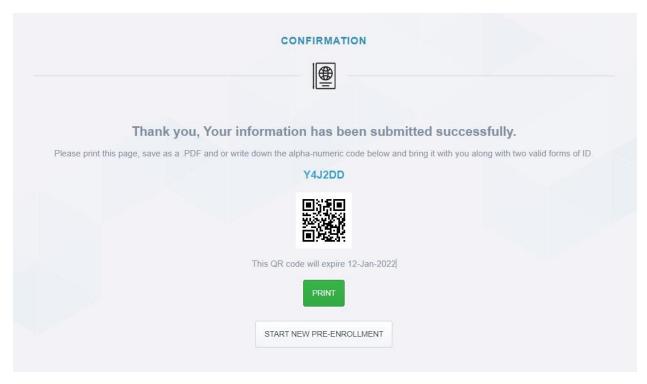
Description							
Gender		Ethnicity		Hair Color		Eye Color	
Male	~	White	~	Brown	~	Blue	
Height				Weight			
Feet		Inches		Pounds			
5	~	11	~	185			
Additional							
Occupation							
NYPD Detective							
5							

Address / Contact Information: Fill out full home address and contact information. Email and phone number should be your home information.

		O These	fields ARE required					
Primary Address								
Line 1				Line 2				
1000 Nakatomi Plaza			Line 2 (c	optional)				
City/Town		Country		State/Province		Zip/Postal		
Los Angeles		United States	~	California	~	90067		
Туре								
Home	*							
		O Add	Additional Address					
		• Add /	Additional Address		1			
	Email	• Add /	Additional Address		1			
	Email Address	• Add /	Additional Address	Туре	1			
	Address	• Add / ne@nypd.gov	Additional Address	Type Work ~	I			
	Address		Additional Address		1			
	Address jmcclar Phone	ne@nypd.gov		Work ~	I			
	Address jmcclar Phone Number	ne@nypd.gov	Additional Address					

Sponsor Name and Contact Information: For full-time state employees: please utilize Elyse Anderson (253) 512-7390 in the sponsor information block and enter in a full year from today's date for the date of visit. The pre-registration system is designed for short term passes as well, so all this information can be edited and corrected when you come in to verify and finalize your registration. We will utilize the expiration date on your REAL ID Act compliant identification for the actual valid dates. Additionally, please put Air Force as the service regardless of which service you are assigned under, select Washington as the state, and search to find Camp Murray. This is to make sure your pre-registration connects to our database rather than a different installation. For purpose of visit, just put "Full time employee" or something similar so we know that it is not for just a short-term pass.

Sponsor Name First		Last			
Hans		Gruber			
Sponsor Contact Information					
Email Address		Phone Number	Extension		
hgruber@badguysrus.com		800-555-212	1	Ext	
Camp Murray Service	State		WA Filter Sites	×	
Service	State		Filter Sites		
Air Force 🗸	Washington	~	Filter results	S	
Site			State	Province	
Camp Murray Fairchild Air Force Base				WA	
Date of Visit		5-10-1-			
Start Date		End Date			
12/14/2021		12/21/2021			
pose of Visit					
o catch bad guys					
			o obtain any info	mation required	
I hereby authorize the DOD an from the Federal government a Investigation (FBI), the Defens (DHS).	and/or state agencies	, including but no	ot limited to, the F	ederal Bureau	



Print out completion page with QR code

Go to the 194 SFS Base Defense Operations Center (BDOC) between 0700-1500 Tuesday through Friday to complete registration. This is located in Building 51 on the ANG side of the installation. Please bring your SSN card as well as your REAL ID Act compliant identification to verify your pre-registration information.

Once the REAL ID card is fully registered within DBIDS, it will be used as the primary form of ID at the gate and be scanned.

Questions can be directed to <u>194WG.SFS.CampMurrayVCC@us.af.mil</u>