

**Download the DoD's latest edition of DD FORM 2875,
SYSTEM AUTHORIZATION ACCESS REQUEST (SAAR) at
<http://www.dtic.mil/whs/directives/infomgt/forms/efoms/dd2875.pdf>.**

Please read/print the following instructions to assist you in completing and submitting this form.

SUPPLEMENTAL INSTRUCTIONS (specific to DVS-WS)

A. PART I: The following information is provided by the user when establishing their USER ID for the **DISN Video Services' Web Site (DVS-WS)**.

Type of Request. Place an "X" in the "Initial" box.

Date. The date that the user completes the form.

System Name. "DISN Video Services' Web Site (DVS-WS)."

Location. "DECC - OKC."

(1) Name. The last name, first name, and middle initial of the user.

(2) Organization. The user's current organization (e.g., DISA, SDI, DoD and government agency or commercial firm).

(3) Office Symbol/Department. The office symbol within the current organization (i.e., SDI).

(4) Telephone Number/DSN. The Defense Switching Network (DSN) phone number of the user. If DSN is unavailable, indicate commercial number.

(5) Official E-mail Address. The user's official e-mail address.

(6) Job Title/Grade/Rank. The civilian job title (Example: Systems Analyst, GS-14, Pay Clerk, GS-5), military rank (COL, United States Army, CMSgt, USAF) or "CONT" if user is a contractor.

(7) Official Mailing Address. The user's official mailing address.

(8) Citizenship. The user's citizenship status (i.e., US, Foreign National, or Other).

(9) Designation of Person. The user's designation (i.e., Military, Civilian, or Contractor).

(10) IA Training and Awareness Certification Requirements. User must indicate if he/she has completed the annual DoD Information Assurance (IA) Awareness Training and the date. Reference <http://iase.disa.mil/eta/> for further information.

(11) User Signature. User must sign the DD Form 2875 with the understanding that they are responsible and accountable for their password and access to the system (i.e., DVS-WS).

(12) Date. The date that the user signs the form.

B. PART II: The information below requires the endorsement from the user's Supervisor or the Government Sponsor.

(13) Justification for Access. "User Access to the DISN Video Services (DVS) registration and scheduling resource systems via the DVS Web site (DVS-WS), at the privilege level designated in item no. 27."

(14) Type of Access Required: Place an "X" in the "Authorized" box for normal access.

(15) User Requires Access To: Place an "X" in the "Unclassified" box.

(16) Verification of Need to Know. To verify that the user requires access as requested. Place an "X" in the box.

(16a) Expiration Date for Access. "N/A." DVS-WS user access will be revalidated on an annual basis following the original access approval date.

(17) Supervisor's Name (Print Name). The supervisor or representative prints his/her name to indicate that the above information has been validated and the access is required.

- (18) Supervisor's Signature. Supervisor's signature is required by the endorser or his/her representative
- (19) Date. Date supervisor signs the form.
- (20) Supervisor's Organization/Department. Supervisor's organization and department.
- (20a) Supervisor's E-mail Address. Supervisor's e-mail address.
- (20b) Phone Number. Supervisor's telephone number.
- (21) – (25) To be completed by Video Operations Center (VOC) personnel. Proceed to item #26.
- (26) Name. The last name, first name, and middle initial of the user, repeated on Page 2.
- (27) Optional/Additional Information. Specify the access (or privilege) level designation the user desires from the following list:

Level 1 (Read Only User)	Level 7 (AT&T Reservation Technicians)
Level 2 (Facilitator / Operator and Scheduler)	Level 8 (Business Development Staff)
Level 3 (COI Scheduler)	Level 9 (JITC Certification Test Staff)
Level 4 (COI Manager)	Level 10 (AT&T Validation Test Staff)
Level 5 (Video Operations Center Staff)	Level 11 (Cryptographic Administration)
Level 6 (DVS Management and Administration)	Level 13 (AT&T Outage User)

Additionally, if the user selects Level 2, 3, 4, or 8, further information (specified below) is required to outline their areas of association(s). (Example: A Level 2 User will list all DVS Site IDs that the user is associated.)

- Level 2 (Facilitator / Operator and Scheduler)** – List ALL DVS Site IDs that you should be associated with and specify if you are the Primary Facilitator, Alternate Facilitator, and/or Scheduler for each of those sites.
- Level 3 (COI Scheduler)** – List your COI(s) (Example: AMC, CENTCOM, NASA, TRADOC).
- Level 4 (COI Manager)** – List your COI(s).
- Level 8 (Business Development Staff)** – List your Theater (i.e., CONUS, SOUTHWEST ASIA, PACIFIC, or EUROPE).

C. PART III: Certification of Background Investigation or Clearance.

- (28) Type of Investigation. The user's last type of background investigation (i.e., NAC, NACI, or SSBI).
- (28a) Date of Investigation. Date of last investigation.
- (28b) Clearance Level. The user's current security clearance level (Secret or Top Secret).
- (28c) IT Level Designation. The user's IT designation (Level I, Level II, or Level III).
- (29) Verified By. The Security Manager or representative prints his/her name to indicate that the above clearance and investigation information has been verified.
- (30) Security Manager Telephone Number. The telephone number of the Security Manager or his/her representative.
- (31) Security Manager Signature. The Security Manager or his/her representative signature indicates that the above clearance and investigation information has been verified.
- (32) Date. The date the form was signed by the Security Manager or his/her representative.

D. PART IV: This information is site specific and can be customized by the DoD, functional activity, or the customer with approval of the DoD. This information will specifically identify the access required by the user.

E. DISPOSITION OF FORM:

TRANSMISSION: Completed form may be e-mailed to the Video Operations Center (VOC) at voc@disa.mil.

FILING: Original SAAR, with digital signatures in Parts I, II, and III, must be maintained on file for one year after termination of user's account. File may be maintained by the DoD or by the Customer's IAO. Recommend file be maintained by IAO adding the user to the system.

DD FORM 2875 FREQUENTLY ASKED QUESTIONS (FAQ)

The DISN Video Services' office offers introductory answers to frequently asked questions about completing and submitting a DD Form 2875, which is required in order to access the DISN Video Services Web site (DVS-WS). Should you have any further questions, please contact the DGSC at dgsc@csd.disa.mil.

Is this form being used to validate a site or an individual?

An individual.

How will I know if the VOC got my DD Form 2875?

You'll get an acknowledgement when the VOC receive your forms.

Can I list a group or organization e-mail address?

No. Later, when you have access to the DVS-WS, you can specify a group e-mail address for scheduling notifications.

How will I know my form has been successfully processed?

The VOC will send a validation acknowledgement via e-mail.

Once the VOC receives a completed DD Form 2875, how long does it take to validate a user request for an ID?

Approximately 2-5 business days.

How long will this form be valid?

The form expires after one year. After which, your DVS-WS access will be revalidated by the VOC on an annual basis.

How long will passwords be valid?

90 days.

Who can I call for assistance in completing my Form 2875?

Call the DISN Global Support Center (DGSC) for guidance.

Toll Free Commercial: (800) 554-DISN (3476); press option 3

Commercial: (614) 692-4790; press option 3

Global DSN: (510) 376-3222; press option 3

DSN: (312) 850-4790; press option 3

Can I use electronic signatures?

Yes.

How do I get my signed DD Form 2875 to the VOC for processing?

Send in an e-mail. The VOC's e-mail address is voc@disa.mil.