Fields in bold are required　　# GETS/WPS Request Form　　　Date:

For POC: Enter this information online at http://gets.ncs.gov. For help: 866-627-2255 or 703-676-2255.
For others: Use this form to collect user information and forward to POC.

Requesting: (select all that apply):　　☐ GETS Card　　☐ WPS Service

Organization: (Acronym) _____　Spell out Organization:_____

Suborganization: (Acronym) _____

Spell out Suborganization: _____

GETS NS/EP Mission Criteria: select one
WPS NS/EP Mission Criteria: select one
NS/EP User Type:　　　　　　　　　　　**Sector:**

For WPS Requests Only

Service Provider: select one

WPS will be an additional cost on your cellular account and must be coordinated with your organization's cellular accounts manager prior to submitting this request.

Account #:　　　　　　　　　　　　**WPS Phone #:**

Name:

_____ _____ __ _____ _____
　(Prefix)　　　　　　　(First Name)　　　　　(MI)　　　　　　**(Last Name)**　　　　　(Suffix)

Name to appear on card: _____

NS/EP Title or Function: _____　　**US Citizen:** ☐ Yes ☐ No

Work Address:_____

　　　　　　_____

City:_____　**State:**_____　**ZIP:**_____　**Country:** _____

Methods to contact subscriber

Provide at least 1 phone number and at least 1 other means of contact (phone, e-mail, etc.).

Primary Phone #: _____　Secondary Phone #: _____

Cellular #: _____　After Hours #:_____

Pager #:_____　Pager PIN # (if applicable): _____

E-mail:_____　Fax # (POC/Alt POC only):_____

If you have a GETS card or were issued one from stockpile, provide 1st 8 digits: _____

International Calling (for GETS): ☐ Yes ☐ No　　Continuity: ☐ Yes ☐ No