



Security Threat Assessment Transfer Request

I _____ am requesting that the
(Print Name)

San Antonio International Airport Badge and ID Office certify my Security Threat Assessment (STA) to the receiving airport listed below.

Signature _____

Date _____

Please complete the following information regarding the receiving airport:

Receiving Airport: _____
Rec. Airport Contact Name: _____
Rec. Airport Contact Phone: _____
Send to (Email or Fax): _____