

SECRET
SECURITY INFORMATION

REQUEST FOR COVERT TSS TRAINING

IMPORTANT: If student is contract agent, he must a. be either a U.S. citizen (or have at least first papers, b. have full operational clearance, c. have signed his contract, and project must be approved before this form is submitted. If student is an alien, training site must be furnished by the requesting Division.

DATE: 22 September 1953

1. Pseudonym of student..... 2. Training Alias: George and Charlie
3. Name of Operations Officer..... Division: SR Senior Staff: FI
- Extension: 2967 1501 A. Name or No. of Approved Project: AERODYNAMIC
5. Operations Officer known to student as (Name).....
6. Student's Background: Full U.S. Citizenship..... First Papers..... Alien, X - Ukrainian
7. Language in which training will be conducted: English
8. Country or area where student will operate: U.S. and possibly Germany
9. Will trainee pass this knowledge on to others: Yes
10. Training to start (Date): 9 October (p.m. only) Training to be completed (date).....
11. Who will provide the training site? SR/DOB

12. Check instruction to be given:

.....Photography: Basic.....Advanced.....Specialized.....

Discussion of flaps and seals and problems incurred thereto.

.....Secret Writing: Basic.....Special.....

Opening of Sealed Envelopes

.....Audio Surveillance Equipment: Basic Familiarization.....Advanced.....

.....Cover Authentication: General..... Specific Area.....

13. Dates trained: 13 Oct. PM only

14. Evaluation: (degree of proficiency)..... Problems of surreptitious entry were discussed, which included a discussion of defensive measures that might be taken.

Instructor, TSS

Chief, Training Division, TSS

Four copies of this form shall be forwarded to Chief, Training Division, TSS

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SOURCE METHOD EXEMPTION 3B2B
NAZI WAR CRIMES DISCLOSURE ACT
DATE 2005