ACCESS TO CAREER WAYPOINTS (CWAY)

The Career Waypoints (CWAY) Program Office will only utilize SAAR-N (OPNAV FORM 5239/14) for authorization to create/modify any type of CWAY account. The SAAR-N (OPNAV FORM 5239/14) must be digitally signed and emailed to BUPERS-33 (Career Waypoints Program Office) at the email listed below. Faxes are not accepted. Sailors may download a prefilled version of this form from the Career Waypoints website.

All CWAY accounts are automatically linked to your CAC via your digital signature on the SAAR-N. Login ID and passwords are no longer issued when creating an account. When you initially log in with your CAC, you will be prompted to enter and confirm your SSN. Counselors cannot issue temporary accounts; therefore, if a temporary account is needed, please email BUPERS-33 to create the account.

If you have any questions about completing the SAAR-N, contact CWAY.

Telephone:  (901)874-2102
Email: career_waypoints@navy.mil
Website:  http://www.public.navy.mil/bupers-npc/career/careercounseling/Pages/C-WAY.aspx

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INSTRUCTIONS FOR COMPLETING THE SAAR-N OPNAV FORM 5239/14

1. “Type of Request.” If you've never had access, check “Initial.” If you are modifying current access, mark “User ID” and fill in your user ID in the block.
2. “Date.” Fill in today's date in DDMMMYYYY format.
3. “System Name.” Fill in “Career Waypoints.”
4. “Location.” Fill in “SPAWAR, NOLA.”

Part I.

1. “Name.” Fill in your Last Name, First Name, and Middle Initial.
2. “Organization.” Your command (i.e. USS Carl Vinson CVN-70).
3. “Office Symbol/Department.” List the department in which you work (i.e. N01C/CCC, N00C/CMC, 600/Dept CC).
4. “Phone.” Fill in your DSN and Commercial phone number. If you do not have DSN, leave blank.
5. “Official E-Mail Address.” Fill in your “.mil” email address only (no Yahoo or Google).
6. “Job Title and Grade/Rank.” List your Job Title (i.e. CCC or DEPT CC) and your rate/rank (i.e. NC1/E6, AE2/E5).
8. “Citizen.” Check the appropriate box as it pertains to you.
9. “Designation of Person.” Check the appropriate box as it pertains to you.
10. “Information Assurance (IA) Awareness Training Requirements.” Check the box and list the date you completed the yearly required IA training. **Must be within the current fiscal year in which you are submitting the SAAR-N.**

Part II.

11. “Justification for Access.” Type in the requested access you need (i.e. Department Career Counselor, Career Counselor, Command Master Chief). List all request UICs in numerical order. If you have more than 20 UICs, list them in an excel spreadsheet and forward with the SAAR-N. If you are simply adding an additional UIC, type in “Keep existing UICs and add “NXXXXX”.

Example block 11 entry:
Type of access requested: Dept. CC.
Requested UICs: 23456; 65432, & 76543

12. “Type of Access Required.” Select “Authorized.”
12a. Not required for CWAY access.
14. “Verification of Need to Know.” Check the box.
14a. “Access Expiration Date.” Fill in your current PRD in MMMYYYY format.
15. “Supervisor's Organization/Department.” The CCC (rated NC or 9588 only) may sign as the supervisor for Dept CC access only. All other applications require CMDCM/SEL, XO, or CO (triad) signature.
15a. “Supervisor's E-Mail Address.” Fill in the email for the supervisor referred to in #15 & 16.
15b. “Phone Number.” Supervisor's phone number.
16. “Supervisor's Name.” Fill in the name referred to in block #15. (Example: Iam. T. Skipper, CDR, CO)
16a. “Supervisor's Signature.” MUST be digitally signed or application will be rejected.
16b. “Date.” Fill in the date signed in DDMMMYYYY format.
17 thru 17b. Not required for CWAY access.
18. “Signature of IAM or Appointee.” MUST be digitally signed by your command designated Information Assurance Manager (IAM) or the application will be rejected.
20. “Phone Number.” Fill in the IAM’s phone number.
21. “Date.” Fill in the date the IAM digitally signed the SAAR-N.
22. “Name.” Name of Sailor requesting access in Last Name, First Name, Middle Initial order.
23. “User Signature.” MUST be digitally signed by the requestor, or it will be rejected.
24. “Date Signed.” Date signed by the requestor in DDMMMYYYY format.

Part III

26. “Type of Investigation.” Fill in the type of security clearance investigation performed for the Sailor requesting CWAY access.
26a. “Date of Investigation.” Fill in the date the security clearance investigation was completed in DDMMMYYYY format.
26b. “Clearance Level.” Fill in the requestor’s security clearance level (i.e. Secret). Note: The Sailor must be eligible for a Secret clearance to get access.
26c. “IT Level Designation.” Check the appropriate box (normally Level II for Secret and Level III for Top Secret).
27. “Verified by.” Fill in the Security Manager’s name, including rate/rank and title (i.e. I. M. Sailor, YNC, ASM).
   Note 1: Per SECNAV M-5510.36, Security Managers must be an officer, GS-11 or above and have a favorably adjudicated SSBI.
   Note 2: Per SECNAV M-5510.36, Assistant Security Managers must be officers, E-6 or above or GS-6 or above.
29. “Security Manager Signature.” MUST be digitally signed by the Security Manager or it will be rejected.
30. “Date.” Fill in the date that the Security Manager digitally signed the SAAR-N Form.

Part IV

31 – 33b. Leave blank.