Export Control Worksheet:

Technology Control Plan - Foreign Hire No Research

1. Employee’s Full Name:

2. Yes [ ]  No [ ]  Export Controls International Visitor’s Worksheets 17-1 and Export Controls International Host’s Worksheet 17-2 have been completed and returned to OVPR’s Export Control Officer.

3. It is unlawful under the State Department’s International Traffic in Arms Regulation (ITAR) or the Departments of Commerce’s Export Administration Regulations (EAR) to send or take controlled technology/information out of the U.S.; disclose orally or visually; or transfer controlled technology/information to a foreign person inside or outside the U.S. without proper authorization.

Controlled technology/information means activities, items, and information related to the design, development, engineering, manufacture, production, assembly, testing, repair, maintenance, operation, modification, demilitarization, destruction, processing, or use of items with a capacity for military application.

4. It is your responsibility to ask your colleagues whether the topics you are discussing or the areas you area entering would/could ITAR or EAR related. A license may be required to access ITAR or EAR controlled technology/information.

5. Engineering, Aviation, Computer Sciences, and Biological Sciences are areas with the greatest potential for an export or deemed export to occur whether it is inadvertent or planned. In addition to laboratories associated with these colleges and departments, you cannot enter or have access to the following areas/laboratories without the area’s Dean’s written permission:

6. Citizenship/Residency

 Yes [ ]  No [ ]  I will be seeking naturalization or permanent resident status.

If Yes, what is the Projected time line?

 Date naturalized/permanent residency established: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. This form must be completed on an annual basis.

8. Certification

 a. I declare the information contained in this document is accurate to the best of my knowledge.

 b. I understand and recognize my responsibilities in complying with federal regulations and WMU policies governing export control.

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| --- | --- | --- | --- |
| Employee’s Signature:  |  | Date: |  |
|  |  |  |  |
| Chair’s Signature: |  | Date: |  |
| Name Printed |  |  |  |
|  |  |  |  |
| Dean’s Signature: |  | Date: |  |
| Name Printed |  |  |  |

**Scan the completed form, then email to ovpr-export-control@wmich.edu**