

ORC USE ONLY

Date Received:

Request for Restricted Party Screening of TAMUCC Employee or Non-TAMUCC Person



Instructions and Certifications (Failure to follow may result in a delay in processing)

Complete this Request for Restricted Party Screening of TAMUCC Employee or Non-TAMUCC Person (Request) to request a screening of a TAMUCC Employee (Employee) or Non-TAMUCC Person (NT Person) (e.g., visitor, visiting scholar, etc), who may potentially have access to or receive controlled items or defense articles on TAMUCC property or owned by TAMUCC.

Each Employee or NT Person must certify whether he/she is a **"U.S. person"** (Section I) for restricted party screening purposes. Or, if a **"foreign person"** (Section II), **including dual citizens**, each Employee or NT Person must request a determination from the Office of Research Compliance (ORC) that the individual is not a restricted party, **and** the individual certifies that he/she will **not have access to** or receive controlled items or defense articles.

If a "foreign person" **will have access to** controlled items or defense articles, contact the Research Compliance and Export Control Officer to request a determination.

By signing this Request, the Employee or NT Person below certifies the following:

1. He/she is a "U.S. person"; or, if he/she is a **"foreign person,"** he/she will not have access to or receive export controlled items or defense articles;
2. Will abide by any and all applicable federal, state, and/or institutional regulations, including any requirements from ORC;
3. Has read and reviewed this Request; certifies that the information provided is accurate; any applicable supporting documentation (e.g., passport, certificate, etc) or third-party approval has been obtained from the appropriate authority and included as an attachment to this Request; has signed the Request electronically; and
4. Has submitted this Request a **minimum of three (3) business days in advance of** the anticipated event giving rise to the Request; will communicate whether there is a firm start date or other deadline associated with the Request.

After completing the foregoing, submit the Request with supporting documentation via email to the Research Compliance and Export Control Office:

research.compliance@tamucc.edu

Section I: U.S. Person

The Employee or NT Person is a "U.S. person" (i.e., U.S. citizen or legal permanent resident of the U.S.)

Full Name:

Signature:

Date:

Include one of the following documents as an attachment:

United States Passport

Certificate of United States Citizenship (INS Form N-560 or N-561)

Certificate of Naturalization (INS Form N-550 or N-570)

Alien Registration Receipt Card *with photograph* (INS Form I-551 or I-151)

Unexpired foreign passport *with I-551 Stamp*

Unexpired Temporary Resident Card (*INS Form I-688; not I-688A or I-688B*)

Unexpired Re-Entry Permit (INS Form I-327)

Unexpired Refugee Travel Document (INS Form I-571)

Certificate of Birth Abroad issued by the U.S. Department of State (Form FS-545 or DS-1350) or Report of Birth Abroad (FS-240)

Original or certified copy of a Birth Certificate issued by a state, county, municipal authority, or outlying possession of the United States, *bearing an official seal.*

Other Specify:

Section II: Foreign Person (includes dual citizens)

The Employee or NT Person is a "foreign person" (*i.e., **not** a U.S. citizen or legal permanent resident of the U.S, dual citizen*)

Full Name:

Country of Citizenship:

Additional Countries of Citizenship:

Signature:

Date:

Include one of the following documents as an attachment:

Unexpired Temporary Resident Card I-688A

Expiration Date:

Unexpired Temporary Resident Card I-688B

Expiration Date:

U.S. Visa Category:

Expiration Date:

Other Specify:

Expiration Date:

Section III: Non-TAMUCC Person

The individual is **not** an employee of TAMUCC.

Legal Name of Employer:

Indicate whether your employer (*not parent or subsidiary*) is incorporated or organized to conduct business in the U.S.

Yes No

If "**no**," list the foreign country of incorporation or organization:

Indicate whether you are representing any additional organization.

Yes No

If "**yes**," provide additional organizations represented:

If "**yes**," indicate the country of incorporation or organization of each additional organization listed above:

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Restricted Party Screening Passed (*copy retained for documentation*)

Documents from Section I or II provided

Approved

Not Approved

Comments:

Name:

Title:

Signature:

Date: