

# OHSU Deemed Export Control Questionnaire for Foreign Nationals

**This questionnaire must be completed by an individual knowledgeable about the prospective employee's / student's / visiting scholar's (Foreign National) work assignment, including the technical nature of the work as well as the source of the financial support. Please return the completed form with a copy the Foreign National's CV to the Office of Export Controls at [exportcontrols@ohsu.edu](mailto:exportcontrols@ohsu.edu).**

Foreign National Name:	
Country of Citizenship or Dual Citizenship :	
Country of Birth (if different):	
Position Title and Department at OHSU:	
Administrative Contact at OHSU:	
Phone Number for OHSU Administrative Contact:	
Email for OHSU Administrative Contact:	

Federal regulations require OHSU to certify that the foreign national either:  
 (1) will not be involved in any activity that would require an export control license; or  
 (2) will be involved in an activity requiring an export control license and OHSU will prevent access to controlled technology until an export control license has been obtained.

Please respond to the questions below as they relate to work that the foreign national will perform at the University and then sign the form at the bottom.

1. Will the foreign national participate in any scientific research?

Yes  or No  (If "No" then skip questions #2- #8.)

2. Provide the following information for each research project in which you know or anticipate the foreign national will participate.

a. Name of Principal Investigator	
b. Job description of the foreign national	
c. Laboratories or work areas of campus	
d. Accessible folders on the x: drive	
e. Title(s) of proposals/grants/awards	
f. PreAward number(s) and associated grant award number(s)	
g. Name of research sponsor	

<p>3. Will the foreign national perform <u>ALL</u> of the following functions for any research equipment: operation, installation, maintenance, repair, overhaul and refurbishing?</p> <p>Yes <input type="checkbox"/> or No <input type="checkbox"/></p>	<p>(If "Yes" then list the equipment.)</p>
<p>4. Will the foreign national participate in any research under a research contract or grant that restricts certain non-US persons from participating in the research or accessing the research results (e.g., restriction on participation by individuals who are not US citizens or green card holders)?</p> <p>Yes <input type="checkbox"/> or No <input type="checkbox"/></p>	
<p>5. Will the foreign national participate in any research under a research contract or grant that restricts publication or dissemination of the research results (other than prepublication review by the research sponsor to insure that the publication would not inadvertently divulge proprietary information that the sponsor has furnished to the researcher)?</p> <p>Yes <input type="checkbox"/> or No <input type="checkbox"/></p>	
<p>6. Will the foreign national be involved in research associated with weapons, select agents, pathogens, toxins, military systems, missiles, satellites, space-related technologies, high performance computers or radar?</p> <p>Yes <input type="checkbox"/> or No <input type="checkbox"/></p>	
<p>7. Will the foreign national be exposed to encryption software source code, or otherwise be involved in the design, development, or production of encryption software?</p> <p>Yes <input type="checkbox"/> or No <input type="checkbox"/></p>	
<p>8. Is there an expectation at this time that the foreign national will have access to sponsor or third party proprietary information, software and/or materials that are not publicly available?</p> <p>Yes <input type="checkbox"/> or No <input type="checkbox"/></p> <p>If yes, please provide us with written confirmation from the provider of the information, software, and/or materials whether or not they are controlled under either the International Traffic in Arms Regulations (ITAR) or Export Administration Regulations (EAR).</p>	
<p>9. I will notify the appropriate Export Control office (<b>exportcontrols@ohsu.edu</b>) before the foreign national moves to a different laboratory or begins work in a setting outside my control or knowledge.</p> <p>PI Name:</p> <p>Title:</p> <p>Signature _____ Date:</p>	

## Internal Use Only – Export Control

Visual Compliance check

There are no apparent deemed export control concerns with the questionnaire.

Other:

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Forwarding instructions

Forward the completed form to the PI and the Office of University Counsel