

**Export Certification Form**  
**Foreign National Employees, Researchers, Students and Visitors**

*Instructions: Prompted by the USCIS introduction of a revised I-129 application form that includes the requirement for an export certification, this form is required for each foreign national employee. Additionally, UAF has a responsibility to determine whether an export license is required for any foreign national working or performing research at the university. This form provides the Office of Research Integrity (ORI) with information necessary to start the export assessment processes. In most cases, we anticipate no export license will be needed and any need for a license will typically be associated with sponsored research. If ORI needs additional information to complete the assessment, we will work directly with the Sponsor/Supervisor identified below. Once the export assessment is complete, the ORI Compliance Officer will sign the form and return it to the Office of International Programs and Initiatives or the Sponsoring Department for inclusion in the visa application packet. Completion of this form does not guarantee that the visa application will be approved nor does it guarantee the applicant will not face delays in the visa application process.*

**Please include a copy of the curriculum vitae and the passport identification page with the submission of this form.**

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**Section A: Foreign National Information:**

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Last Name	<input type="text"/>	First Name	<input type="text"/>	Middle Name	<input type="text"/>
Country of Birth	<input type="text"/>	Birth Date (mm/dd/yyyy)	<input type="text"/>		
Country(ies) of Citizenship (List all)	<input type="text"/>				
Country(ies) of Legal Permanent Residency (List all)	<input type="text"/>				
Current Physical Address	<input type="text"/>				
Permanent Address	<input type="text"/>				
Home Institution/Organization	<input type="text"/>				
Home Country Financial Sponsorship (If any)	<input type="text"/>				
Home Country Military Affiliations (If any)	<input type="text"/>				
E-mail Address	<input type="text"/>				

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**Section B: Position Information:**

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Position Title	<input type="text"/>
Sponsoring Department/Institute	<input type="text"/>
Faculty Sponsor/Supervisor*	<input type="text"/>
Sponsor/Supervisor E-mail Address	<input type="text"/>

*\* This is the Faculty Supervisor or Principal Investigator for research scholars or post doctoral fellows. For faculty or staff, this should be the employee's direct supervisor.*

List the sources of funding to be used for the person's salary and, if applicable, their research. **Include the UAF Grant number or if not awarded, the Proposal number (G# or S#, respectively).**

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Will the individual have access to technology (software, equipment or materials) specifically designed or developed for military (e.g. night vision, GPS Y-code, shielding, unmanned aerial vehicles (UAVs), or targeting algorithms) or space (e.g. rockets, satellites, space telescopes or probes) applications? ***If yes, provide a list of the military or space technology(ies).***

Will the individual need access to UAF, sponsor or third party controlled, confidential or proprietary information, software, equipment or technical data? This includes information about the design, manufacture, or repair of standard laboratory equipment that is NOT in the public domain (i.e. available on the company's public website) or anything subject to a Non-Disclosure Agreement. This does not include basic operation or use instructions. ***If yes, provide a description of the information, software, equipment or technical data.***

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**Section C: Research Information:**

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Is research part of the person's position description? ***If yes, provide a brief description of the research project or program. If a specific project or program has not been determined, describe the specific areas of interest and inquiry that the person expects to pursue.***

Will the individual be involved in any research or scholarly activity that is NOT intended for public dissemination? ***If yes, summarize the export controls, contract terms, publication restrictions, citizenship restrictions, etc., associated with the project.***

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**Section D: Certification:**

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Name of Person Completing This Form

Phone Number  UAF Department/Institute

E-mail Address  Date (mm/dd/yyyy)

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**Section E: ORI Use ONLY**

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A license IS / IS NOT required for these activities.

UAF Office of Research Integrity Certifying Official Signature  Date (mm/dd/yyyy)