H-1B Non-Immigrant Visa Export Compliance Questionnaire

Visa Applicant:	visa Type: H-1B
Department/Unit:	Responsible Faculty:
(name, title, phone number, email)	
Position Number:	
Grant Number (if paid from a grant)	·
Please answer t	the following questions to the best of your ability:
Will the visa holder participate in Sp	ponsored Research? Yes No
Name of External Sponsoring Agency	
GMU Grant Number or Proposal Number	
describe the specific purpose and tec	formed (Basic, Applied, Product Development, Testing, etc) and chnology area of the research:
Will the research involve military, d	lefense, intelligence, space or encryption? If so, please describe:
Will the visa holder be provided wit export controlled or sponsor or 3rd p	h or have access to any information, materials, or software that is party proprietary or confidential? If so, please provide the
Will the visa holder be provided wit so, please provide the description.	h any government furnished equipment, information, or software? If
Yes No	any Department of Energy grants, awards, or scholarships? ess to any Department of Energy sites, information, or technologies?
Signature of Responsible Faculty	
Signature of the Dean or the Departs	ment