

**H-1B Visa Export Compliance Questionnaire**

Visa Beneficiary: \_\_\_\_\_ Visa Type: H-1B

Department/Unit: \_\_\_\_\_

Responsible Faculty/Supervisor: \_\_\_\_\_  
(name, title, phone, email) \_\_\_\_\_

Position Number: \_\_\_\_\_ Grant Number: \_\_\_\_\_  
(if paid from grant)

**I certify that if the Sponsoring Agency, grant number, or any other information on this form changes, that I will notify OIPS immediately.**  (PI or Supervisor Initial here)

**PLEASE ANSWER ALL OF THE FOLLOWING QUESTIONS TO THE BEST OF YOUR ABILITY.**

1. Will the visa holder participate in Sponsored Research? Yes  No 
  - a. Name of External Sponsoring Agency: \_\_\_\_\_
  - b. GMU Grant Number or Proposal Number: \_\_\_\_\_
  
2. Will the employee be supported by any Department of Energy grants, awards or scholarships:  
Yes  No 
  - a. If Yes, will your employee need access to any Department of Energy sites, information, or technologies?  
Yes  No
  - b. If Yes, provide the fund number: \_\_\_\_\_
  
3. Characterize **any** research to be performed (sponsored or not and include Basic, Applied, Product Development, Testing, etc...) and describe the specific purpose and technology area of the research:

4. Will the research involve military, defense, intelligence, space, or encryption? Yes  No 
  - a. If yes, please describe:
  
5. Will the visa holder be provided with or have access to any information, materials, or software that is export controlled or sponsor or 3<sup>rd</sup> party proprietary or confidential? Yes  No 
  - a. If yes, please describe:
  
6. Will the visa holder be provided with any government furnished equipment, information, or software?  
Yes  No 
  - a. If yes, please describe:

**Signature of PI or Supervisor:** \_\_\_\_\_

**Signature of the Dean or Department Chair:** \_\_\_\_\_