

Buffalo State / Research Foundation

Export Controls

Foreign Travel Disclosure Form

Traveler's Legal Name:	Email:
Department:	Phone Number:
In accordance with the <u>Research Foundation's Foreign Travel Policy</u> (see page 31) and the <u>Federal Export Control requirements</u> , this form is required each time you will be traveling outside of the United States; and /or when transporting items, software, data, or technology outside of the United States or to a foreign person in the U.S.; or when working with foreign persons, educational institutions, or businesses. Please complete and submit this form a minimum of two weeks prior to all International Travel or (preferably) as soon as you know that you will be traveling outside of the U.S. If it is determined that a license is required, it may take up to two (2) months to secure.	
Business Purpose of the Travel; include Country(ies) and City(ies):	
Dates of Travel:	You are a citizen of what country:
Will you be working with foreign persons, faculty, students, educational institutions, or businesses while traveling for your project? Yes No If yes, please list the name(s) and institutional affiliation(s) of the foreign persons with whom you will be working.	
Will you be transporting any encrypted software, technology, items, or If yes, please describe them below.	r data to a foreign country? Yes No
Will you be transporting any equipment to a foreign country? If yes, please list the equipment (i.e. laptop computer, cell pho equipment and/or its parts. Please include that information (one, GPS). You are required to have the ECCN code for the
Have you received information regarding International Medical insurar	nce? Yes No
Will any dependents be traveling with you? Yes If yes, please list their full legal name and citizenship.	No
Cell Phone Number used when travelling:	Cell Phone Carrier:
Please sign and date, then submit the completed form to the Research that you may need an Export Control license, the Accounts Payable Ma investigate your compliance requirements with the applicable federal of require prior approval by the Campus President and Operations Manage determined unallowable if the appropriate process is not followed.	Foundation Office, Buckham Hall B206. If it is determined anager/Export Control Officer will work with you to further regulations. Travel to countries on the <u>Federal Watch List</u>
Funding Source / Account Number (Buffalo State or Research Fo	undation):
Traveler's Signature:	Date:
Name / Signature:	Date: