

**Jackson State University**

Office of Research and Economic Development

**I-129 Export Control Questionnaire**

The United States Citizenship and Immigration Services requires Jackson State University to indicate whether a license is required from the U.S. Department of State, Commerce, or the Treasury to release Technology or Technical Data to a Beneficiary employed by Jackson State University. The information requested in this form will assist the JSU Compliance Officer to determine whether an export license is required for the Beneficiary named below.

**Important Instructions**

* Please use the current form, as previous versions may be obsolete and cannot be accepted. The current version is available at www.jsums.edu/research.
* To avoid delay in processing, please answer all questions, and provide sufficient and accurate details for the information requested.

**PART A: PETITIONER AND PROJECT INFORMATION**

JSU PI Information Grants Manager and Administrator Info.

PI’s Name:       GM’s Name:

College/Department:       Admin’s Name:

Project Title:

Funding Source(s): [ ]  NASA [ ]  DOD [ ]  DOE [ ]  DARPA [ ]  NSF [ ]  NIH

[ ]  Endowment/Other (Name):

**PART B: BENEFICIARY’S INFORMATION**

Beneficiary’s Name (as stated in Passport):

First:       Middle:       Last:

Country of Citizenship:       Country of Birth:

Country of Passport Issuance:       Visa Type:       Sex/Gender:

Does the Beneficiary have dual citizenship [ ]  Yes [ ]  No

Beneficiary’s Title:

Is the Beneficiary a full-time Jackson State University employee? [ ] Yes [ ]  No

**PART C: CERTIFICATION STATEMENT**

Complete as appropriate; sign and submit to the Export Control Officer with the H-1B/J-1 Packet.

[ ]  No. Based on completion of the Visa Deemed Export Questionnaire (attached) and consultation with Jackson State University, I believe a deemed export license is not required from either the U.S. Department of Commerce or the U.S. Department of State to release technology or technical data to the international employee; or

[ ] Yes. Based on completion of the Visa Deemed Export Questionnaire and consultation with Jackson State University, I believe a deemed export license may be required. By signing below, I certify that an export license may be required to release project technology or technical data to the beneficiary and I will prevent access to the controlled technology or technical data by the beneficiary until and unless the required license or other authorization is received to release it to the beneficiary.

**PART D: ACTIVITIES/SCOPE OF WORK**

In detail, specify the assignment, purpose and proposed activity(ies) of the Beneficiary. This requires a comprehensive explanation.

**PART E: BENEFICIARY’S EXPERTISE AND RESEARCH INFORMATION**

1. What is the Beneficiary’s area of expertise? Please provide a copy of the Beneficiary’s CV or Resume.

1. Will the Beneficiary participate in or work on any Jackson State University Sponsored Research activity(ies)? [ ]  Yes [ ]  No.

If yes, provide name and grant number of all projects in which the person can participate or be afforded access.

1. Please describe the type of technology or areas of research that the Beneficiary will work on. Provide publications, website or other information that provides supporting information about the area of research.

1. Will the results of the sponsored activity be published in totality or taught in an official Jackson State University course or otherwise? [ ]  Yes [ ]  No.

If yes, provide a reference or example as to where the research or instruction can be found in the public domain.

1. Will the sponsored activity consist entirely of basic or applied research, the results of which are commonly found entirely in the public domain? [ ] Yes [ ]  No.

If applied, will the work have military, space, energy or related applications? [ ] Yes [ ]  No. If yes, specify.

1. In order to perform the work described above, will the Beneficiary require access to export-controlled information, hardware, software or data? Please indicate all that apply.

Technical Data [ ] Yes [ ] No Technical Assistance [ ] Yes [ ] No

Hardware [ ] Yes [ ] No Proprietary/Confidential Info. Yes [ ]  No [ ]

Software [ ] Yes [ ] No Other [ ] Yes [ ] No

1. Will the Beneficiary assist any other Jackson State University co-worker, faculty or staff in addition to the host/sponsor? [ ] Yes [ ] No. If yes, list each person, title and department, for whom the Beneficiary provides assistance.

1. Will the Beneficiary be provided access to any unpublished, proprietary or confidential information, items, materials, software, prototypes or articles furnished by a sponsor? [ ] Yes [ ] No

Describe your response:

1. Is the sponsored activity subject to any access or dissemination, or national security restriction? [ ] Yes [ ] No

Describe your response:

1. Will any of the activities be related to the development of a new or emerging technology? [ ]  Yes [ ] No

Describe your response:

1. If yes to item 10 above, will any portion of this work be withheld to protect proprietary or confidential information? [ ]  Yes [ ]  No

Describe your response:

1. Will the Beneficiary have access to or operate any research instruments? \_\_\_\_Yes \_\_\_No

If Yes, specify all of the research instruments.

**PART F: OTHER ASSURANCES**

1. Does the Jackson State University host/sponsor currently have any programs subject to export controls, technology control plans or U.S. government security classifications? [ ]  Yes [ ] No
2. Will the Beneficiary be contributing in any way to any programs subject to a technology control plan or other U.S. government restriction? [ ] Yes [ ] No
3. Is the Beneficiary affiliated with the governments of China or Iran, as a student, intern, visiting scholar, employee (faculty, staff, lecturer, researcher, etc.) even on a volunteer basis or in the U.S. on sabbatical? This includes professors with joint appointments, Chinese/Iranian company representatives or Chinese/Iranian government entity, and all others that receive scholarships or other types of funding from the Chinese/Iranian governments. [ ] Yes [ ] No
4. Is the Beneficiary a non-Chinese or non-Iranian researcher performing research for China/Iran, such as other U.S. researchers acting on behalf of a Chinese/Iranian university or corporation? [ ]  Yes [ ]  No

TO THE BEST OF MY KNOWLEDGE, I CERTIFY THAT THE INFORMATION PROVIDED HEREIN IS ACCURTE AND TRUTHFUL.

Printed Name of Faculty Sponsor/Department Chair

Faculty/Sponsor Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Export Control Officer Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FOR ADMINISTRATIVE REVIEW ONLY**

VP for Research & Economic Development \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_

Provost/VP for Academic Affairs \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_