## NOAA Line Office (LO)/Corporate Office (CO) Endorsement Supplement for the NOAA Sponsor of Foreign National Guest (revised 01/01/11)

## **Instructions:**

- \*The Department Sponsor/NOAA (DSN) must ensure that all required sections of this form are completed.
- \*This form must accompany NAO 207-12, Appendix B, "Certification of Conditions and Responsibilities for Departmental Sponsors of Foreign National Guests."
- \* If the LO/CO has completed controlled technology (CT) assessments for all facilities, Part B does not need to be completed. For LO/COs that have not completed CT assessments at all facilities, the DSN must forward this form to the LO/CO Controlled Technology Coordinator (CTC) who must complete Part B.
- \*Part A and C must be completed in all cases.
- \*If the foreign national will access an Office of Marine and Aviation Operations (OMAO) ship, port office, or Marine Operations Center (MOC), the DSN must contact the MOC. If the foreign national will access an OMAO plane or Aircraft Operations Center (AOC), the DSN must contact AOC.

Part A. Please describe the collaborative efforts and contributions by the Foreign National Guest (named below) that will further NOAA's mission. Include specific detail and clarity regarding the foreign national's affiliations (organizational/government/education), title, qualifications, expertise, and proposed scope of work. (SPELL OUT ACRONYMS).

Dates of Visit (mm/dd/www)

ome Country	Dates of Visit (mm/dd/yyyy)
ffiliation	Title
this a RENEWAL request? Yes No	
	mission the Foreign National Guest will help further- example: Climate or Hurricane Prediction
I certify that the benefits gained from hosting	are significant and further
	(Print/type Foreign National Guest Name)
	ion of Conditions and Responsibilities for Departmental Sponsors of Foreign National
<u> </u>	sure that my Guest will not have unauthorized physical, visual, or virtual access to classified olled, and otherwise controlled, proprietary, or not-for-public-release data, information, or
technology.	
(Print Name & Signature of DSN/Date)	Facility Name
(Time Figure 60 Signature 61 D.S. ((Date))	Tuesting Training
Additional Point of Contact for this request (e-1	mail address only):
	ed CT assessments at all facilities). A controlled technology inventory and access control plan(s) are in place at th uest will have access. I have communicated to the DSN any access control procedures that may be needed to
Printed Name & Signature of CTC/Date)	
art C. I concur that the value of collaborative efforts and co	ntributions gained by providing access to NOAA facilities, staff and information has been balanced with the need to

Part C. I concur that the value of collaborative efforts and contributions gained by providing access to NOAA facilities, staff and information has been balanced with the need to protect classified, SBU, export controlled, or otherwise controlled, proprietary or not-for-public-release data, information, or technology. A controlled technology inventory has been completed for the locations identified and access controls are in place to prevent unauthorized access to controlled technology by a foreign national.

(Printed Name & Signature of CTC or Designated LO/CO Official Date)

(LO/CO)

The CTC or Designated Official shall forward this completed form and Appendix B to the Office of the Chief Administrative Officer (OCAO) via Ann Murphy and Michele Peruch. The sponsor does not send these forms directly to the OCAO.