

## COLLABORATING VISITOR QUESTIONNAIRE

This questionnaire is required to give Collaborating Visitors, as defined in CMU's Collaborating Visitor Guidelines [<https://www.cmu.edu/collaborating-visitor/documents/visitor-guidelines-Aug2018.pdf>], access to any of CMU's domestic campuses and locations (Pittsburgh, Silicon Valley, and other U.S. locations) EXCLUDING visitors to the Software Engineering Institute (SEI) and the National Robotics Engineering Center (NREC). SEI and NREC have separate processes for screening visitors that must be followed.

This questionnaire should not be used if the individual is (or will be at the time of the "visit") enrolled as a student at CMU or being paid by CMU.

**Once completed, the questionnaire must be submitted to the CMU Visitor Coordinator at [Visitor-support@andrew.cmu.edu](mailto:Visitor-support@andrew.cmu.edu) at least thirty (30) days in advance of a Collaborating Visitor's anticipated visit. If the Collaborating Visitor will need immigration documents from CMU, this questionnaire must be submitted at least sixty (60) days in advance. A Collaborating Visitor is only authorized access to CMU's U.S. campuses and locations AFTER the CMU Visitor Coordinator has sent formal approval of the visit on behalf of CMU.**

This questionnaire must be completed by an individual knowledgeable about the prospective Collaborating Visitor and their proposed visit, including the technical nature of any intended work the visitor may perform while at CMU. The Collaborating Visitor Guidelines [<https://www.cmu.edu/collaborating-visitor/documents/visitor-guidelines-Aug2018.pdf>] provide details regarding inviting and hosting Collaborating Visitors at CMU. Having accurate information is critical to ensure compliance with U.S. export laws and regulations, the Fair Labor Standards Act, Immigration laws, U.S. Department of Labor laws, as well as University policies and procedures, and a prompt review and approval for the Collaborating Visitor.

Please answer all questions as completely as possible with the information you have available. Your answers will assist in determining which CMU Impacted Department(s) (ORIC, OSP, OGC, OIE, and/or HR) need to review this Questionnaire. The person completing this form should copy any relevant administrator in their department.

PART I: HOST DEPARTMENT INFORMATION	
1. Full name of person completing this form:	
2. Email address of person completing this form:	
3. CMU faculty or staff host/sponsor name:	
4. CMU faculty or staff host/sponsor email:	
5. CMU Department:	
PART II: COLLABORATING VISITOR INFORMATION	
1. Full Legal Name of Collaborating Visitor:	
2. U.S. Person Status	U.S. Person <input type="checkbox"/> Non-U.S. Person <input type="checkbox"/> A U.S. Person is a U.S. Citizen, U.S. Permanent Resident (Green Card Holder), or a Refugee or Political Asylee. <b>If the Collaborating Visitor is a Non-U.S. Person, the Non-U.S. Person questions must be answered.</b>
3. Country of Citizenship:	
4. Country of Birth:	
5. Date of Birth: If the Collaborating Visitor is under 18, then the CMU department will need to follow the requirements under CMU's <a href="#">Policy on the Protection of Children</a> , including registering as a program involving minors.	
6. Permanent Address and Telephone:	
7. Email Address:	
8. Home Institution/Organization (include name and complete address):	
9. Status/Position/Title at Home Institution/Organization:	
10. Did you attach/upload a copy of the Collaborating Visitor's CV/resume?	Yes <input type="checkbox"/> No <input type="checkbox"/> <b>This is a REQUIRED document to accompany this questionnaire.</b>

FOR NON-U.S. PERSONS ONLY	
1. Current U.S. Immigration Status	<input type="checkbox"/> Not currently in the U.S. <input type="checkbox"/> In the U.S.
2. Please indicate current visa status, if applicable. If CMU will be providing immigration documents, indicate the requested visa status:	<input type="checkbox"/> <b>F-1</b> (Academic Student) <input type="checkbox"/> <b>OPT</b> (Optional Practical Training for F-1 Students) <input type="checkbox"/> <b>B-1</b> (Tourist) <input type="checkbox"/> <b>B-2</b> (Business) <input type="checkbox"/> <b>H1-B</b> (Temporary Worker) / <b>O-1</b> (Extraordinary Ability) Has a completed I-129 attestation form been submitted? Yes <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/> <b>J-1</b> (Professors, Scholars, Research Assistants, Students, Trainees, Interns, Teachers, Specialists) <input type="checkbox"/> <b>M-1</b> (Vocational Student)
3. Will the Visitor need immigration documents from CMU?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, your Department will need to initiate visa document request process with OIE. Information can be found at <a href="https://www.cmu.edu/oie/">https://www.cmu.edu/oie/</a>
4. If CMU is not providing immigration documents, is the Collaborating Visitor's immigration status being sponsored by another organization of institution?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, indicate the immigration status the Collaborating Visitor holds and the name of the visa sponsor (institution/organization):
PART III: VISIT INFORMATION	
COLLABORATING VISITOR STATUS	
Collaborating Visitor Type	<input type="checkbox"/> <b>Student Visitor:</b> Visiting student enrolled at a non-profit educational institution other than CMU that will be working on independent research. <input type="checkbox"/> <b>Academic/Non-Profit Visitor:</b> Visiting employee from a non-profit educational institution or 501(c)(3) nonprofit organization. <input type="checkbox"/> <b>Company Visitor:</b> Visiting employee of a company/organization (other than a 501(c)(3) organization). <input type="checkbox"/> <b>Unpaid Intern:</b> (See below) <input type="checkbox"/> <b>Other:</b> Visitors who do not fall under the other listed categories.
<b>UNPAID INTERN:</b> The following questions are used to determine whether the Collaborating Visitor qualifies as an Unpaid Intern (additional guidance regarding these questions and unpaid internships may be found at <a href="https://www.cmu.edu/hr/career/managers/recruiting-staffing/interns/">https://www.cmu.edu/hr/career/managers/recruiting-staffing/interns/</a> (Andrew ID required):	
1. The internship provides training that would be similar to that which would be given in an education environment (e.g. clinical experience; hands-on training; practical application of material taught the in classroom; and/or opportunities to learn a skill, process or business function).	Yes <input type="checkbox"/> No <input type="checkbox"/>
2. Please describe the learning and development objectives of the internship. This description may be included in the internship offer letter provided to the intern.	
3. The work performed in the internship is connected to the intern's formal education program (at CMU or at another institution) via integrated coursework or the receipt of academic credit.	Yes, academic credit from CMU <input type="checkbox"/>  Yes, credit from another institution <input type="checkbox"/> Please specify:  Yes, integrated coursework <input type="checkbox"/> Please specify:  No <input type="checkbox"/>
4. The intern is required to prepare a report of his/her experiences during or after the internship.	Yes <input type="checkbox"/> No <input type="checkbox"/>
5. The overall duration and daily schedule of the internship accommodates the intern's academic commitments by corresponding to the intern's academic schedule (e.g. the internship takes into account the intern's class schedule and/or occurs during summer breaks or semester breaks).	Yes <input type="checkbox"/> No <input type="checkbox"/>

# Carnegie Mellon University

<p>6. The internship is limited in time (e.g. 1 semester or 1 calendar year).</p>	<p>Yes, the internship will last no more than:</p> <p>Less than 1 Semester <input type="checkbox"/></p> <p>1 Semester <input type="checkbox"/></p> <p>2 Semesters <input type="checkbox"/></p> <p>1 Calendar Year <input type="checkbox"/></p> <p>No, the internship will last more than 1 year. <input type="checkbox"/></p>
<p>7. The work to be performed by the intern is primarily for the benefit of the intern (e.g. the work performed is primarily for the purpose of learning as opposed to performing tasks that primarily benefit the university and/or the supervisor).</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>8. The intern will work under close supervision by staff or faculty.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>9. The majority (i.e. greater than 50%) of the internship will be spent shadowing employees and/or learning and developing skills.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>10. The intern <u>will not</u> displace regular employees (i.e. the intern will not perform work that is substantially similar to work performed by paid employees of the university).</p>	<p>Yes (An employee will not be displaced) <input type="checkbox"/></p> <p>No (An employee will be displaced) <input type="checkbox"/></p>
<p>11. The intern <u>will not</u> receive any wages or other financial compensation for time spent in the internship.</p>	<p>Yes (Wages will not be received) <input type="checkbox"/></p> <p>No (Wages will be received) <input type="checkbox"/></p>
<p>12. The intern <u>is not</u> entitled to a job upon completion of the internship.</p>	<p>Yes (The intern is not entitled to a job) <input type="checkbox"/></p> <p>No (The intern is entitled to a job) <input type="checkbox"/></p>
<p><b>VISIT INFORMATION</b></p>	
<p>1. Purpose of visit (provide a <u>detailed</u> description of any research work the visitor will conduct while on campus, including project purpose and goals):</p>	
<p>2. Does the faculty host/sponsor intend to publish the result of the collaboration with the Collaborating Visitor?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> If no, please describe:</p>
<p>3. What is the proposed period of the visit?</p>	<p>From: _____ To: _____</p> <p><b>Start date must be at least 30 to 90 days from today's date depending on need for immigration documents.</b></p>
<p>4. What is the Collaborating Visitor's proposed campus location?</p>	
<p>5. What is the building, floor, room/office where the Collaborating Visitor will be assigned to while on campus?</p>	
<p>6. Is the Collaborating Visitor currently employed by another institution?</p> <p>a. If Yes, will the Collaborating Visitor continue to be employed and paid by this institution during their visit?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please provide name of institution: _____</p> <p>6a. Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>7. Is the Collaborating Visitor funded by another institution or organization? (such as a scholarship)</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please provide name of institution: _____</p>
<p>8. Will the Collaborating Visitor be using potentially hazardous equipment or materials and require training by EHS?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> Please describe: _____</p>
<p>9. Is this visit the result of an unsolicited request?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Please describe how the faculty host knows the visitor: _____</p>
<p>10. Will the Collaborating Visitor be working on their own research or a specific CMU project? (This helps determine visitor category)</p>	<p>Own Project <input type="checkbox"/> CMU Project <input type="checkbox"/></p>

11. Will the Collaborating Visitor have access to any export controlled information or materials?	Yes <input type="checkbox"/> No <input type="checkbox"/> I don't know <input type="checkbox"/> If yes, please describe:
12. Are there any existing technology control plans (established formal processes and procedures to ensure that technology, data, or information are not disclosed to unauthorized individuals or exported without a license) in the area the Collaborating Visitor will be working?	Yes <input type="checkbox"/> No <input type="checkbox"/> I don't know <input type="checkbox"/> Please provide details:
13. Will the Collaborating Visitor take CMU classes during his/her visit?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please describe:
14. Does the Collaborating Visitor intend to use the visit to fulfill requirements toward a degree at his/her home institution?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please describe:
<b>OSP: Answers to these questions will determine if OSP needs to review additional agreements to ensure CMU is meeting all contractual obligations. If the answers to these questions change during the visit, please notify OSP.</b>	
1. Is the work to be performed by the Collaborating Visitor being conducted under any sponsored research project such as a grant, contract, federal award, or internally funded research?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please provide Oracle strings and project names:
2. Is the work to be performed by the Collaborating Visitor related to a formal CMU program and/or governed by a separate written agreement (consortium, use of a recharge center, etc.) whose scope includes visitors?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please describe:
3. Will the Collaborating Visitor have access to, or be provided, any CMU confidential and/or CMU proprietary information including any potentially patentable information/technology or CMU background IP?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please describe:
4. Will the Collaborating Visitor have access to, or be provided, any third party confidential and/or proprietary information?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please describe:
5. Will the Collaborating Visitor work on any NASA funded research or have access to any NASA funded research?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please describe:
6. Has the CMU faculty sponsor worked or collaborated with the Collaborating Visitor on research or other activities in the past and/or developed IP together?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please describe past collaborations:
<p><b>PART IV: FCPA INFORMATION</b> – The following questions are used to determine whether the Collaborating Visitor will receive any significant financial benefit from CMU through waiver of fees normally charged to other visitors and/or expense reimbursement. A separate FCPA form, to be completed by the Collaborating Visitor, is used to determine whether the Collaborating Visitor is a "Foreign Official" under the FCPA.</p> <p>Note: If the proposed Collaborating Visitor is a Non-U.S. Person, they must also complete the FCPA FORM <a href="https://www.cmu.edu/collaborating-visitor/documents/invited-visitors-FCPA-certification.pdf">https://www.cmu.edu/collaborating-visitor/documents/invited-visitors-FCPA-certification.pdf</a></p>	
1. Does the CMU department hosting/sponsoring the Collaborating Visitor normally charge a fee to Collaborating Visitors or the Collaborating Visitor's home institution?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please indicate the amount of the fee:
2. If a fee is normally charged to Collaborating Visitors or the Collaborating Visitor's home institution, will the fee be charged to this particular Collaborating Visitor?	Yes <input type="checkbox"/> No <input type="checkbox"/> Please indicate the amount of the fee to be charged and, if applicable, explain any waiver or reduction of the normal fee:
3. Do you anticipate that CMU will reimburse the Collaborating Visitor for any expenses incurred during the visit?	Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please describe:

**FCPA:** The Foreign Corrupt Practices Act (FCPA) is a U.S. law that generally prohibits the payment of anything of value (whether tangible or intangible) to Foreign Officials for the purpose of obtaining or retaining business. "Foreign Officials" are defined broadly under the FCPA. The term "Foreign Official" includes all officials and employees of a foreign government, as well as employees of institutions that are owned or controlled by a foreign government (e.g. a government owned/controlled university). Detailed guidance regarding the FCPA is available at <https://www.cmu.edu/ogc/fcpa/>.

PART V: OPTIONAL INFORMATION (for requesting department use)	
1. GL String for any related processing charges (visas, etc.)	
2. Insurance Information for Interns	
3. Please list specific clauses for inclusion in the offer letter:	

For Office Use Only			
Case Number:	Impacted Departments:	HR <input type="checkbox"/> OSP <input type="checkbox"/>	OGC <input type="checkbox"/> OTHER <input type="checkbox"/>