

DEPARTMENT OF HOMELAND SECURITY

FOREIGN NATIONAL VISITOR ACCESS REQUEST**INSTRUCTIONS**

In order to support visits by foreign nationals to DHS facilities and personnel, visitor hosts shall submit this form to DHS element Foreign Visit representatives (per element Foreign Visit Procedures) 30 days in advance of a visit (30 days or less) or 60 days in advance of an assignment (31 days or more). For purposes of this form, a foreign national is defined as a person who is not a citizen or national of the United States. This form shall be filled out for each visitor (including drivers, interpreters, etc.) and each program to be visited. Visitor hosts shall be notified upon approval or disapproval of the visit. If the visit may involve sharing or disclosure of classified information, the host must contact the DHS Foreign Disclosure Officer prior to the visit for guidance.

FOREIGN VISITOR INFORMATION

| | | | |
|---|--|--|--|
| NAME OF VISITOR (LAST, FIRST, MIDDLE) | | GENDER | DATE OF BIRTH (MM-DD-YY) |
| CITY AND COUNTRY OF BIRTH | | COUNTRY(IES) OF CITIZENSHIP | |
| GREEN CARD <input type="checkbox"/> Yes <input type="checkbox"/> No | GREEN CARD EXPIRATION DATE (MM-DD-YY) | LAWFUL PERMANENT RESIDENT NUMBER | |
| SOCIAL SECURITY NUMBER | VISA TYPE | VISA NUMBER | VISA EXPIRATION DATE (MM-DD-YY) |
| PASSPORT COUNTRY OF ISSUE | PASSPORT NUMBER | PASSPORT EXPIRATION DATE (MM-DD-YY) | |
| CURRENT EMPLOYER / DIVISION / OFFICE | | TYPE OF BUSINESS/ORGANIZATION | |
| EMPLOYER ADDRESS (STREET, CITY, STATE, ZIP CODE, COUNTRY) | | | EMPLOYER PHONE NUMBER |
| VISITOR JOB TITLE / POSITION | | | VISITOR CONTACT NUMBER |

VISIT INFORMATION

| | | |
|---|---|---------------------------------|
| DATE OF REQUEST | DHS VISITOR HOST NAME (LAST, FIRST MIDDLE) RODRIGUEZ, LUIS, L. DR. (USDA, ARS) | |
| HOST ORGANIZATION (ELEMENT, DIVISION, OFFICE) USDA, ARS, NAA, PIADC, FADRU | | |
| HOST PHONE NUMBER 631-323-3364 | HOST E-MAIL ADDRESS Luis.Rodriguez@ars.usda.gov | HOST FAX 631-323-3006 |
| VISIT START DATE 04/03/2013 | VISIT END DATE 04/05/2013 | NUMBER OF DAYS ON SITE 3 |

UNCLASSIFIED DESCRIPTION OF VISIT PURPOSE / SUBJECTS TO BE DISCUSSED / INTERNATIONAL AGREEMENTS
Attend African Swine Fever Workshop hosted by USDA, ARS.

FULL NAME OF ORGANIZATION AND PROGRAM TO BE VISITED US Department of Agriculture, Agricultural Research Service, North Atlantic Area, Plum Island Animal Disease Center, Foreign Animal Disease Research Unit

FACILITIES TO BE VISITED (INCLUDE BUILDING NAME/NUMBER, ADDRESS, ROOM NUMBERS, AND HIGHEST LEVEL OF CLASSIFICATION FOR WHICH THE FACILITY IS ACCREDITED -
USDA, ARS, NAA, PIADC, Building 100.

REMARKS (COORDINATION / SPECIAL REQUIREMENTS)

REVIEWS

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|--|----------|-----------------------|---------------------|
| FOREIGN VISIT COORDINATOR D. Penny Rempe Page 2 | DATE | PHONE 631-323-3223 | FAX 631-323-3044 |
| E-MAIL Penny.Rempe@ars.usda.gov | COMMENTS | | |
| INTERNAL SECURITY REP | DATE | PHONE | FAX |
| E-MAIL | COMMENTS | | |
| APPROVAL AUTHORITY DR. Dr. Luis L. Rodriguez, Research Leader, USDA, ARS, NAA, PIADC | DATE | PHONE 631-323-3364 | FAX 631-323-3006 |
| E-MAIL Luis.Rodriguez@ars.usda.gov | COMMENTS | | |
| OTHER REVIEWER | DATE | PHONE | FAX |
| E-MAIL | COMMENTS | | |
| OTHER REVIEWER | DATE | PHONE | FAX |
| E-MAIL | COMMENTS | | |
| <p>PRIVACY ACT STATEMENT: The Privacy Act, 552a, requires that federal agencies inform individuals, at the time information is solicited from them, whether the disclosure is mandatory or voluntary, by what authority such information is solicited, and what uses will be made of the information. The collection of this information is authorized by EO 9397, 6 USC 341, 44 USC 3101, and EO 12958. Provision of the information concerning foreign visits is mandatory under the provisions of EO 12958. Failure to provide it may impact planned visits. Use of this information is for internal purposes to facilitate visitor processing.</p> | | | |