

## Security Information Requirements for International Visitors

1. Visitor's Full Name (official):	
2. Gender:	
3. Date of Birth:	
4. Place of Birth (city, province, state, country):	
5. Country of Citizenship:	
6. Passport Type and Number:	
7. Date of Passport Issue:	
8. Date of Passport Expiration:	
9. Type of Visa, Visa Control Number, Visa Issue and Expiration Dates:  * If the visitor is a Permanent Resident of the U.S., provide Permanent Resident Number:  * If the visitor is currently in the U.S., on what Visa Type:	
10. Visitors Residence Address:	
11. Visitor's Organization:	
12. Visitor's Position/Title within the Organization:	
13. Visitor's Organization Address:	
14. Visitor's Organization Telephone Number:	
15. CDC Host's Name (Must be an FTE): Host's Telephone Number: Host's CIO: Host's Division: Host's Branch: Host's Supervisor:	
16. Host's Campus, Building & Room Number (also, please indicate other facilities, if any, for which access is requested):	
17. Date(s) of Visit:	
18. Purpose of Visit:	
19. Will the individual require access to select agent laboratories? (Yes / No)	
20. Will the individual require laboratory access? (Yes / No)	
21.. Will any portion of the visit include laboratory work or training? (Yes / No)	
22. Will any portion of the visit include work or training in animal areas? (Yes / No)	

***\*ALL INFORMATION IS REQUIRED TO BE SUBMITTED IN THE VISITOR MANAGEMENT SYSTEM FOR APPROVAL. INFORMATION CAN BE SUBMITTED 90-DAYS IN ADVANCE, BUT NO LATER THAN 10 FULL- BUSINESS DAYS IN ADVANCE OF INTENDED VISIT.***

***PLEASE PROVIDE COPIES OF YOUR PASSPORT, VISA, AND/OR PERMANENT RESIDENT CARD, ETC.***