

Name of Faculty Member Departing CWRU:

Department:

Date of Departure:

Appendix H : Technology Control Plan or participating in an export controlled project

Responsible Person: University Compliance Office: Lisa Palazzo, exportcontrol@case.edu

If you are identified on a Technology Control Plan or participating in an export-controlled project or activity, before leaving CWRU you should email Lisa Palazzo at exportcontrol@case.edu and provide answers to the following questions:

What is the name and CON number of the project?

Is the project staying here at CWRU?

If yes, who will be replacing you? Describe any other personnel changes.

If no, will the project continue at your new institution?

Please attach to your email a copy of the Technology Control Plan.

By signing below the faculty member acknowledges he/she has communicated with the University Compliance Officer.

Faculty Member Signature:

Date:

Department Administrator Name:

Date:

Department Administrator Signature:

Appendix H is to be returned as part of the completed Faculty Member Departure packet.