CASE WESTERN RESERVE UNIVERSITY

INTERNAL USE ONLY
(Rev 02/2022)

RECOMMENDATION FOR APPOINTMENT OF EXCHANGE VISITOR (J-1)

[redacted]

a change in this program; i.e. EV is delayed in arriving, completing their program, departed for home, change of address, applied for 2 year home residency waiver, etc.

Initiator Initials ____ Contact Person Initials_____ Date_____

J1 Recommendation Form Page 2:

The following questions are to be answered by the hosting faculty member

Does the hosting faculty member have any CWRU Export Control Technology Control plans in place? Yes___ No___

If Yes, Contact the CWRU Compliance Office so that an export control analysis can be performed.

Does the hosting faculty member haven an individual outside financial interest in the funding organization? Yes___ No___ If Yes, contact the CWRU COI Office for assistance.

Does the hosting faculty member have a faculty appointment with the organization that is funding the visitor? Yes___ No___ If yes, contact the Office of the Provost for assistance

If the appointee will be working on sponsored projects, do **any** of the projects in the hosting faculty member's