Individual Requesting and Responsible for TCP: **Click here to enter text.**

Department: **Click here to enter text.**

Research Project Title: **Click here to enter text.**

Sponsor: **Click here to enter text.**

Export control training last completed: **Click here to enter a date.**

Original request/last update: **Click here to enter a date.**

|  |  |
| --- | --- |
| Have the location(s) covered by TCP changed since the original request/last update?  | Yes [ ]  No [ ]  |
| Has any personnel who will have access to export controlled subject matter changed since the original request/last update?  | Yes [ ]  No [ ]  |
| Are there any changes to sponsored research award or non-disclosure agreements submitted with the original request/last update changed?  | Yes [ ]  No [ ]  |
| Has scope of the use of export controlled items, including technical data, hardware, software described in the original request/last update changed?  | Yes [ ]  No [ ]  |
| Has there been any change where the work or activity is being performed/conducted? | Yes [ ]  No [ ]  |
| Has there been any change in how will room are secured and who has access to keys/key cards? | Yes [ ]  No [ ]  |
| Has there been any change to how electronic data be stored and who will have access to the data? | Yes [ ]  No [ ]  |
| Has there been any change in international travel associated with this project? | Yes [ ]  No [ ]  |

Please review each of the below questions, answering yes or no, and summarize the changes or updates here:

**Click here to enter text.**

I certify that this project remains in compliance with the original/updated Technology Control Plan developed between myself and the Office of Research Protections and Compliance. I understand that I could be held personally liable for violations of the ITAR and EAR if I unlawfully disclose, regardless of form or format, export-controlled Information to unauthorized persons. I also understand that CITI training must be repeated every four (4) years while the TCP remains in effect.

Signatures: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PI Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Supervisor – PI) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_