

U.S. DEPARTMENT OF AGRICULTURE
AGRICULTURAL RESEARCH SERVICE

**DEPARTURE CHECKOUT OF
FOREIGN RESEARCH ASSOCIATE**

NAME OF ASSOCIATE

COUNTRY OF PRESENT CITIZENSHIP

AREA AND LOCATION ASSIGNED

DATE OF DEPARTURE FROM U.S.

FACILITY (Name and Address)

NAME OF SPONSOR

CHECKOUT

- Final report completed
- Arrangements made for publications *(If applicable)*
- Patent applications and assignments completed *(If applicable)*
- ARS property turned in:
 - Keys
 - Research notebooks
 - Other *(Specify):*
 - Other *(Specify):*
- Information furnished associate regarding Internal Revenue rules and regulations on alien clearance *(Certificate of Compliance)*.
(Check with local Internal Revenue agent).

FACILITY SECRETARY WILL NOTIFY OF DEPARTURE IN ADVANCE

- Director's office
- Receptionist
- Records Service
- General Services Division after departure
- Other *(Specify):*

REMARKS

SIGNATURE *(Facility Head)*

DATE