

**NOAA Line Office (LO)/Corporate Office (CO) Endorsement Supplement  
for the NOAA Sponsor of Foreign National Guests (revised 9/15/10)**

**Instructions:**

- This form must accompany NAO 207-12, Appendix B, "Certification of Conditions and Responsibilities for Departmental Sponsors of Foreign National Guests."
- If the LO/CO has completed controlled technology (CT) assessments for all facilities, Part B does not need to be completed; otherwise, the CTC must complete Part B. Part A and C must be completed in **all** cases.
- If the foreign national will access an Office of Marine and Aviation Operations (OMAO) ship, port office, or Marine Operations Center (MOC), the DSN must contact the MOC. If the foreign national will access an OMAO plane or Aircraft Operations Center (AOC), the DSN must contact AOC.

**Part A.** Please describe the collaborative efforts and contributions by the Foreign National Guest (named below) that will further NOAA's mission. Include specific detail regarding the foreign national's affiliations (organizational/government/education), title, qualifications, expertise, and proposed scope of work. (**SPELL OUT ACRONYMS**).

Is this a **RENEWAL** request? Yes \_\_\_\_\_ No \_\_\_\_\_

**Home Country:**

**Dates of Assignment (renew after one year, if necessary):**

**Affiliation:**

**Title:**

I certify that the benefits gained from hosting \_\_\_\_\_ are significant and further  
(Print/type Foreign National Guest Name)

NOAA's mission. I have signed the "Certification of Conditions and Responsibilities for Departmental Sponsors of Foreign National Guests" and will take all reasonable steps to ensure that my Guest will not have unauthorized physical, visual, or virtual access to classified, Sensitive But Unclassified (SBU), export controlled, and otherwise controlled, proprietary, or not-for-public-release data, information, or technology.

\_\_\_\_\_  
(Printed Name & Signature of DSN/Date)

\_\_\_\_\_  
(Facility Name)

Optional: Additional Point of Contact for this request (**email address only**): \_\_\_\_\_

**Part B. (Required for LO/COs that have not completed CT assessments at all facilities).** A controlled technology inventory and access control plan(s) are in place at the sites identified on Appendix B to which the foreign national guest will have access. I have communicated to the DSN any access control procedures that may be needed to prevent the release of controlled technology.

\_\_\_\_\_  
(Printed Name & Signature of CTC/Date)

**Part C.** I concur that the value of collaborative efforts and contributions gained by providing access to NOAA facilities, staff and information has been balanced with the need to protect classified, SBU, export controlled, or otherwise controlled, proprietary or not-for-public-release data, information, or technology. A controlled technology inventory has been completed for the locations identified and access controls are in place to prevent unauthorized access to controlled technology by a foreign national.

\_\_\_\_\_  
(Printed Name & Signature of CTC or Designated LO/CO Official/Date)

\_\_\_\_\_  
(LO/CO)

The CTC or Designated Official shall forward this completed form and Appendix B to the Office of the Chief Administrative Officer (OCAO) via Ann Murphy at ann.murphy@noaa.gov. The sponsor **does not** send these forms directly to the OCAO.