

FOREIGN NATIONAL VISITOR/GUEST FORM:

Please fill out the fields below and submit to the Office of Security via FAX to 301-713-1548.

**DO NOT EMAIL THIS FORM**

Visitor First Name: \_\_\_\_\_ Visitor Last Name: \_\_\_\_\_

Gender: Male  Female

Passport Number and Issuing Country: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

Country of Residence: \_\_\_\_\_

Country of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Sponsor Last Name: \_\_\_\_\_ Sponsor First Name: \_\_\_\_\_

Visitor's Proposed Working Location  
(Building Number, City, State): \_\_\_\_\_

Purpose of Visit:

Sensitive Project: Visit involves any classified, Sensitive But Unclassified (SBU), or otherwise controlled, proprietary, or not-for-public release data, information, or technology YES  NO

Estimated Arrival Date (MM/DD/YY):

Length of Stay (in Days):

Days of Notice Given

Departure Date (MM/DD/YY)