

DOE Foreign Access Central Tracking System (FACTS) Questionnaire

Assignee Name:	First Name	Middle Name	Last Name	Suffix	
SLAC Point of Conta					
Are you a citizen of					
YES (SKIP the rem	ainder of Part 1, and MO	/E on to complete Part 2)			
NO NO (COMPLETE th	ne remainder of Part 1 and	d Part 2)			
I am a citizen of: —	Please	list <u>all</u> countries in which you cu	rrently hold citizenship		
Are you a US Green		YES NO	rrently floid citizenship.		
Place of birth:					
City or Region		1	Country		
Please write N/A if t	-	Please be sure to indicate	the country, purpose f		
Country/Countries	1	Purpose		Dates	
Part 2: To be comple	eted ONLY by the indivi	dual coming to SLAC Che e	ck the box(es) that app	lv to vou below	
I will be perform	ning work at or for SLA articipating in reviews, o	C. This includes, but is not collaborating with research fellows, undergraduate/gra	limited to: performing exers, conducting/participa	xperiments, having a SLA ting in workshops, as wo	
I expect to receiv	ve payments or reimbui	rsements from SLAC.			
I am NOT doing	work for or at SLAC, wil	I NOT have a computer acc	ount, and will NOT receiv	e reimbursements.	
I hereby affirm that I l	nave completed the fo	rm myself, and the informa	ation provided is comple	te and accurate.	
Today's Date (mm/dd/yyyy)			Assignee Signature		
	SAVE COMPLI	ETED FORM AND RETURN	TO SENDER		
Part 3: To be comple	eted by SLAC host or Ad	dministrative Contact, save	d, and forwarded to vue@	gslac.stanford.edu	
I have reviewed this o	document and confirm	that the information selec	ted in Part 3 is accurate.		
Todav's Da	te (mm/dd/yyyy)		SLAC Contact Printed Name		

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