



**Lifespan**

ATTESTATION

Foreign Person: \_\_\_\_\_  
(Name)

For Completion by Supervisor/Principal Investigator/Chair (please check one):

\_\_\_\_\_ I certify that a license **is not required** from either the U.S. Department of Commerce or the U.S. Department of State to release such technology as described in the Export Administration Regulations (EAR) and the International Traffic in Arms Regulations (ITAR) to the foreign person, or

\_\_\_\_\_ I certify that a license **is required** from either the U.S. Department of Commerce or the U.S. Department of State to release such technology as described in the Export Administration Regulations (EAR) and the International Traffic in Arms Regulations (ITAR) to the foreign person, and I will prevent access to the controlled technology or technical data until the required license or other authorization has been obtained.

\_\_\_\_\_  
(Name, please print)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Signature of Supervisor/Principal Investigator/Chair)

\_\_\_\_\_  
(Date)