University of Arkansas Fayetteville

Requirement for a Technology Control Plan

A Technology Control Plan (TCP) is required for research which deals with technical items, data, and/or software controlled by U.S. Export Administration Regulations (EAR) or the International Traffic in Arms Regulations (ITAR). This requirement applies to all research activities whether or not they are externally sponsored. The TCP shall include physical and information security plans, personnel screening procedures, and a process for carrying out the research in a controlled environment. The TCP should specifically address the following:

A) Personnel Training - Awareness and basic understanding of export restrictions; document time and date of training. *NOTE: All laboratory personnel should receive basic training.*

B) Personnel Screening - Identity of foreign nationals with physical access to the laboratory area; identity, residency status, and project role of UofA participants; identity of person with primary responsibility for security of controlled items/materials/equipment (usually the Principal Investigator but may be a senior member of the research team).

C) Physical Security - Laboratory and building access, escort requirements, visitor logs, etc.

D) Equipment Access - Identification of controlled laboratory equipment and methods for restricting access.

E) Information Security - Control of access to both electronic and physical data and information, software, and prototype.

F) Internal security evaluation - Periodic review and audit of internal controls to identify and report findings of any unauthorized export.

G) Statement that participants are not on any of the following lists:

* Denied Persons List
* Unverified List
* Entity List
* Specially Designated Nationals List
* Debarred List

H) Statement that a) controlled items have been or will be identified for all participants prior to allowing access; b) all participants having access to controlled items have been informed of the security measures to be used in controlling access; c) participants will be adequately supervised by the person responsible for access control to prevent the export to unauthorized persons.

I) Signature of Principal Investigator and, if different, the person with primary responsibility for access control.

J) Signature of Department Head/Chair or unit equivalent acknowledging approval to engage in controlled research activities as described.

Technology Control Plan

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| Principal Investigator | |  | | | | | | | | | | |
| Phone: | |  | | | | | | Email: | |  | | |
| Campus Address: | |  | | | | | | | | | | |
| Locations Covered By Plan: | | | | Building(s) | | | | | | | | Room(s) |
| Sponsor (if applicable) | |  | | | | | | | | | | |
| Cost Center Number (if known) | | | Project Period | | | | | | Start | | End | |
| Contractual Obligations/Restrictions | | Yes  No | | | If Yes, describe | | |  | | | | |
| Non-Disclosure Agreement | | Yes  No | | | If Yes, parties to agreement: | | |  | | | | |
| Attachments. Describe in detail the following steps taken to prevent the release of controlled items/information. | | | | | | | | | | | | |
| A. | Personnel Screening and Training | | | | | D. | Physical Security | | | | | |
| B. | Physical Access | | | | | E. | Information Security (including computer access) | | | | | |
| C. | Internal Security Evaluation | | | | |  | | | | | | |

Certification:

By signing below, I certify I am committed to the protection of controlled items in accordance with U.S. export regulations and that the statements contained herein are accurate and truthful to the best of my knowledge and belief. I further certify that a) controlled items have been or will be identified for all participants prior to allowing access; b) all participants having access to controlled items will receive basic training in U.S. export regulations and be informed of the security measures to be used in controlling access to project information prior to access, and c) all participants will be adequately supervised by me, the Principal Investigator, or by the person designated the primary responsibility for access control if other than myself.

I have verified that no personnel working on this project are on any of the following Lists: a) Denied Persons, b) Unverified, c) Entity, d) Specially Designated Nationals, and e) Debarred/Suspended.

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|  |  |  |
| Principal Investigator |  | Date |
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|  |  |  |
|  |  |  |
| Designated Control Person (if other than Principal Investigator) |  | Date |
|  |  |  |
|  |  |  |
|  |  |  |
| Dept. Head/Chair or Equivalent |  | Date |

Export Control Plan Attachments

| Principal Investigator:  Project Title: | |
| --- | --- |
| A. | Personnel Screening and Training: |
| B. | Equipment Access: |
| C. | Internal Security Evaluation: |
| D. | Physical Security: |
| E. | Information Security: |