*\*For additional information please visit* [*www.hr.arizona.edu/dcc*](http://www.hr.arizona.edu/dcc)

*\*A list of* [*DCC types*](http://syscon.arizona.edu/sites/default/files/Designated%20Campus%20Colleagues%20Discounts_Services%20Matrix%20V.4.4.pdf) *is available on the Systems Control Website.*

*\*Non-Enrolled Minors on Campus Program Participation Forms* [*http://www.studentaffairs.arizona.edu/vpsoffice/minors/minor\_policy.pdf*](http://www.studentaffairs.arizona.edu/vpsoffice/minors/minor_policy.pdf)

|  |
| --- |
| DCC Information |

|  |  |  |  |
| --- | --- | --- | --- |
| DCC Type: Click here for DCC Type |  | Start Date (MM/DD/YYYY):  | Expiration Date (MM/DD/YYYY):  |
| Person Information |
| (Legal) Last Name: |  | First Name: | EmplID (if known): |
| Date of Birth (MM/DD/YYYY):  | Other Names Used (if any): |
| Home Phone: ( )  | Gender: (Check one) [ ]  M [ ]  F | Personal Email: |
| Mailing Address:  |
| 1. Are you a minor (under age 18)?

(Check one): [ ] Yes [ ]  No***(MINORS ARE DEFINED AS INDIVIDUALS UNDER 18 YEARS OF AGE, IN ACCORDANCE WITH THE STATE OF ARIZONA CHILD LABOR LAWS ARS 23-232)*** \*[Minor and sponsor must attach the appropriate Program Participation form](http://www.studentaffairs.arizona.edu/vpsoffice/minors/minor_policy.pdf). | Have you previously: 1. Worked for the UA? [ ] Yes [ ]  No
2. Held a UA no-salary or DCC appointment? [ ] Yes [ ]  No
3. Enrolled as a UA student? [ ] Yes [ ]  No
 |
| Citizenship |
| 1. Are you a US Citizen or Permanent Resident? [ ] Yes [ ]  No
 |
| Visa Permit Data (complete if answer to citizenship question is “No”) |
| 1. Citizen/Passport Country:

Visa Status Date (MM/DD/YYYY):  | Visa type: Visa Exp. Date (MM/DD/YYYY):  |
| Duties/Services Performed |
| 1. Are you collaborating or performing services in the US? [ ] Yes [ ]  No
 |
| 1. Are you collaborating on research activities with UA faculty or research scientist? [ ] Yes [ ]  No
 |
| 1. Brief (under 250 characters) description of duties:
 |
| Sponsor/DCC Building Information |
| Sponsor’s Last Name: | Sponsor’s First Name:  |  Sponsor’s EmplID: |
| [Affiliate Institution](http://www.hr.arizona.edu/dcc/affiliate_institutions): | Average weekly hours (w*hole numbers only please):* |
| UA title (Affiliate and Associates only): |
| [Building:](http://www.space.arizona.edu/buildings/building-info.shtm)   | Room: | UA Directory Phone: |

|  |
| --- |
| Security Sensitive Functions - *(For additional information please visit* [*http://policy.arizona.edu/pre-employment-screening*](http://policy.arizona.edu/pre-employment-screening) *)* |
|  | ***Yes***  | ***No*** | ***Comments*** |
| 1. Significant financial oversight responsibilities?
 |  |  |  |
| 1. Unsupervised contact with minors who are not enrolled students of the University?
 |  |  |  |
| 1. Unrestricted access to residence hall rooms?
 |  |  |  |
| 1. Role designated by Dean or Vice President as “security or safety sensitive”?
 |  |  |  |
| 1. Driving on university business in UA, rented, or personal vehicles?
 |  |  |  |
| Import/Export - *(For additional information please visit* [*http://orcr.vpr.arizona.edu/export-control*](http://orcr.vpr.arizona.edu/export-control) *)* |
|  | ***Yes*** | ***No*** | ***Comments*** |
| 1. Access to ITAR Controlled data, technology, materials information, software or equipment?
 |  |  |  |
| 1. Access to EAR Controlled technology or encryption software code?
 |  |  |  |
| 1. Has restrictions on the release of certain project information?
 |  |  |  |
| (Import/Export - continued) | ***Yes*** | ***No*** | ***Comments*** |
| 1. Has a publication or access and dissemination restriction?
 |  |  |  |
| 1. Has a military connotation or end-use?
 |  |  |  |
| 1. Is sponsored by a defense agency?
 |  |  |  |
| 1. Is related to space, missile technology, or biological/chemical weapons?
 |  |  |  |
| 1. Requires foreign national approval by sponsor or no foreign nationals are allowed?
 |  |  |  |
| 1. Involved in a project that has a technology control plan in place?
 |  |  |  |
| 1. Do you have a reason to believe the individual will need an export license?
 |  |  |  |
| Specialized Training Required - *(For additional information please visit* [*http://risk.arizona.edu/training/index.shtml*](http://risk.arizona.edu/training/index.shtml) *)* |
|  | ***Yes*** | ***No*** | ***Comments*** |
| 1. Working in a laboratory setting with any of the following:
 |  |  |  |
| * 1. Bloodborne pathogens or other biological materials?
 |  |  |  |
| * 1. Radioactive materials?
 |  |  |  |
| * 1. Lasers or other non-ionizing radiation?
 |  |  |  |
| * 1. Hazardous Chemicals
 |  |  |  |
| 1. Working in a non-laboratory setting with chemical or biological materials?
 |  |  |  |
| 1. Handling animals (living or deceased), animal tissues, fluids, or waste byproducts in a research setting.
 |  |  |  |
| 1. Performing work that requires protective equipment including respiratory and hearing protection?
 |  |  |  |
| College of Medicine - *(For additional information please visit* [*http://ahsc.arizona.edu/contracting*](http://ahsc.arizona.edu/contracting) *)* |
|  | ***Yes*** | ***No*** | ***Comments*** |
| 1. Participating in clinical teaching of medical students or residents?

 *If Yes, complete next question* |  |  |  |
| 1. Signed a preceptorship agreement through contracting office or associated with an institution that has an executed preceptor agreement on behalf of clinicians?
 |  |  |  |
| Required Attachments |
| For Affiliates: CV, [Affiliate Verification Form](file:///C%3A%5CUsers%5Cjrcorona%5CAppData%5CLocal%5Cjazmins%5CAppData%5CLocal%5CMicrosoft%5CWindows%5CTemporary%20Internet%20Files%5CContent.Outlook%5C2L9Z5C44%5C%28http%3A%5Cwww.hr.arizona.edu%5Cfiles%5CAffiliateRequestForm51812.pdf%29) |
| For Associates: CV |
| For Grad Committee Members: CV or other rationale |
| If Yes to #2: Copy of Visa Documents (do not attach—Please forward to Systems Control) |

Preparer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Completed: \_\_\_/\_\_\_/\_\_\_\_

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