

CUSTOMER VERIFICATION FORM
Export Controlled Information
Authorization Form

This form is to be used for customers of the Johns Hopkins University/WSE-ERG. All applicants must be US citizens qualified to receive unclassified limited-distribution information.

All non-government applicants must be registered through their organization with the Joint Certification Program Office (JCP) (aka DLA, DLIS, or DD2345) and certified by a government official. Additional information concerning registration with the Joint Certification Program Office (JCP) can be obtained by contacting the JCP at 1-800-352-3572 <http://www.dla.mil/HQ/InformationOperations/Offers/Products/LogisticsApplications/JCP.aspx>.

PART I. To be completed by the **JHU/WSE-ERG Customer.** (Read the above, complete, and sign.)

Name (type or print): _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____ E-mail: _____

I understand that information I receive which is subject to U.S. export control laws cannot be divulged to non-U.S. citizens or organizations without first obtaining approval or license from the Department of State for items controlled by the International Traffic in Arms Regulations (ITAR), or the Department of Commerce for items controlled by the Export Administration Regulations (EAR).

I affirm that I will not disclose, distribute or transmit export-controlled information to any unauthorized person or organization and that I will promptly report to the Federal Bureau of Investigation any attempt by an unauthorized person to solicit export-controlled information.

I understand that distribution of technical data whose export is restricted by the Arms Export Control Act (Title 22, U.S.C., Sec 2751, et seq.) or the Export Administration Act of 1979, as amended, Title 50, U.S.C., App. 2401 et seq. is a violation of these export laws and are subject to severe criminal penalties.

Signature: _____ **Date:** _____

DD2345 Certification Number (only to be completed by non-government applicants): _____

*All applicants **must** be registered with the JCP and the JCP Custodian **must** provide the certification number.*

PART II. To be completed by the applicant's **Facility Security Officer or Human Resource Officer.**

I hereby certify as a Facility Security Officer or Human Resource Representative that the applicant is a U.S. citizen and is an employee of the above named organization.

Name (type or print): _____ Position Title: _____

Organization: _____

Phone: _____ Fax: _____ E-mail: _____

Signature: _____ Date: _____

PART III. For non-government employees. To be completed by the applicant's **Government Sponsoring Official.**

I hereby certify as a Government Sponsoring Official that the applicant is working on said contract and has the requisite need-to-know and is qualified to receive militarily critical technical data as defined by DoD Directive 5230.25.

Government Contract No.: _____ Contract Expiration Date: _____

Name (type or print): _____ Position Title: _____

Organization: _____

Phone: _____ Fax: _____ E-mail: _____

Signature: _____ Date: _____

Questions? Contact Mary Gannaway at 410-992-7304, ext. 211, or by e-mail to: mtg@jhu.edu.

Please mail or fax to: Johns Hopkins University/WSE-ERG
10630 Little Patuxent Parkway, Suite 202, Columbia, MD 21044-3286
Phone: 410-992-7300 --- FAX: 410-730-4969