

**REPORT OF FOREIGN VISITOR(S), GUEST(S), CONFERENCE ATTENDEE(S)**  
 REQUIRED FOR ALL FOREIGN VISITORS/GUESTS -- 48 HOURS IN ADVANCE FOR VISITORS AND CONFERENCE ATTENDEES  
 (SEND ORIGINAL TO IAAO) --30 DAYS IN ADVANCE FOR GUESTS (SEND ORIGINAL TO OSY, COPY TO IAAO)\*

VISITOR (3 days or less)       CONFERENCE ATTENDEE (5 days or less)       GUEST (more than 3 days)

FULL NAME			DATE OF BIRTH		
First	Middle	Last	Month	Day	Year

PLACE OF BIRTH		PASSPORT			
City	Country	Number	Issuing Country		

TITLE/POSITION	GENDER	<input type="checkbox"/> Male	<input type="checkbox"/> Female
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EMPLOYER/SPONSOR	TELEPHONE
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ADDRESS
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CITIZENSHIP	COUNTRIES OF DUAL CITIZENSHIP (if applicable)
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COUNTRY OF RESIDENCE	U. S. PERMANENT RESIDENT	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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DATE(S) OF VISIT
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NIST HOST(S) (Name, extension, e-mail)	ORGANIZATIONAL CODE NUMBER
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REASON FOR VISIT OR TITLE OF LECTURE(S)
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ROOMS/BUILDINGS TO BE UTILIZED
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REPORT PREPARED BY	TELEPHONE EXTENSION	DATE
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FOLLOWING REQUIRED FOR LECTURERS ONLY (including signatures)

LECTURERS ONLY - GIVE BRIEF BIOGRAPHY
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LECTURE FEE	TRAVEL	PER DIEM
\$	\$	\$

RESPONSIBLE TECHNICAL STAFF MEMBER	TELEPHONE EXTENSION	ORGANIZATIONAL CODE NUMBER	DATE
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DIVISION CHIEF (NAME AND SIGNATURE)	OU APPROVAL (NAME AND SIGNATURE)
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APPROVED - INTERNATIONAL AND ACADEMIC AFFAIRS OFFICE (NAME AND SIGNATURE)	DATE
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\*BOULDER DISTRIBUTION: Original to Security; Copy to Group and IAAO (Mail Stop 1090)