**Technology Control Plan**

1. Project Title:
2. Purpose:
3. Start/End Date:
4. PI/Task Leader (responsible for Technology Control Plan)
5. Name (and contact information) of responsible sponsor contact who has approved the TCP.
6. Description of technology/information to be controlled/maintained and media (U.S. mail, email, fax, courier, etc.) for communicating information (describe for each level of control required). Note if encryption of email or fax is required.
7. Reason for Control (required approval foreign nationals, IP, etc)?
8. List of persons [with citizenship status and any access (level of information) limitations] authorized to access information

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| --- | --- | --- | --- |
| Person | U.S. Citizen or permanent resident | Access/level limitations | TCP and Export Control Training Complete (Y/N) |
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*(As required, on case-by-case basis, select University-executive officer may access to ensure adequate internal-appeal administration and agency interface.)*

1. How will controlled information be identified (Hardcopy, electronic, other media)? Describe for each level of control required (password protection, file storage, etc).
2. How/Where will information be stored (List all locations and person responsible for control at each location)? Describe for each level of control required.
3. How will information be controlled in 1) office areas and 2)common use areas (laboratories, conference rooms, etc.)? Describe for each level of control required. Unauthorized persons must not be permitted to observe or have access to data or hardware.
4. How and where will controlled information be stored at the end of the project?
5. PI/Task Leader’s statement of disposition of all controlled information at the end of the project (signature and date required).

Signatures:

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Principal Investigator Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

University Research Counsel Date

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Empowered Official Date

Acknowledgement of Disposition:

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Empowered Official Date