

**PACIFIC NORTHWEST
CRYO-EM CENTER**

Mail code CL-P2M
2730 S.W. Moody Ave.
Portland, OR 97201



Unescorted Visitor Information Form (UVIF)
PNCC On-site Badge Access

version 04/25/19

- 1) All non-OHSU visitors must complete a **new** Unescorted Visitor Information Form (UVIF) two weeks before arrival to PNCC.
 - a) **Simultaneously**, the Visiting Scholar's Institution submits to the PNCC User Coordinator or PNCC staff point-of-contact a letter on institutional letterhead verifying that the visiting scientist is currently a student/employee and, importantly, that a pre-hire/pre-student background check was conducted and was clean.
 - b) A **returning** form must be provided for every new approved proposal.
 - c) A **resubmission** form must be submitted (along with a new Institutional Verification Letter) if the user's institution, position title, or contact information changes.
- 2) PNCC reviews the UVIF and signed materials it has received and distributes to the other approving OHSU departments, as appropriate.
- 3) PNCC Emergency Safety procedures will be reviewed with each visitor upon their arrival at the PNCC.
- 4) PNCC access badges will be held by visitors only during their scheduled time and forfeited back to the PNCC upon departure for the day (unless they are scheduled to be on site overnight and vetted for instrument use).
 - a) PNCC Visitors must report a misplaced or lost access badge immediately to both PNCC staff and to OHSU Public Safety **503 494-7744**, for deactivation and replacement. A charge of \$25 will be incurred for replacement of a badge.

Unescorted Visitor Information Form (UVIF): Visiting Scholar
 PNCC On-site Badge Access

PNCC use only	
Host Site Information	
Site name (program, department, etc.): PNCC	Supervisor name: Dr. Claudia López
Physical location(s) of Visiting Scholar: RLSB P2 Microscopy Suite and Atrium	Supervisor phone: 503-418-0186
Proposed schedule/ hours per week: Approved proposal will be scheduled	Supervisor email: lopezcl@ohsu.edu
Requested start date:	Anticipated end date:
Visiting Scholar Information	
Visitor name:	Visitor email:
Visitor date of birth:	Home Institution/company:
Visitor phone:	Visitor Position Title and Dept:
Administrative contact email: n/a	Born or lived most of their life outside the US? <input type="checkbox"/> No <input type="checkbox"/> Yes**
** If Yes, please answer: Country of Citizenship (or Dual Citizenship):	
Country of Birth (If Different):	
UVIF Status: <input type="checkbox"/> New <input type="checkbox"/> Returning <input type="checkbox"/> Resubmission/updated info	
Description of Visit	
PNCC Visiting Scholars are established academic or research professionals who are here at OHSU to learn from PNCC personnel, collaborate on work, and/or use PNCC specialized equipment. Please reference the PNCC User and Access Agreement for detailed terms and conditions.	
Approved Proposal #:	
PNCC Proposal PI:	
Visitors will handle or come into contact with biological/chemical hazards during their visit	Known Hazards in the PNCC include: Large volumes of Volatile and Asphyxiating Gases, Carcinogens and other Laboratory Chemicals. Visitors must abide by the safety training provided upon PNCC arrival. Please describe any Hazards that the Visiting Scientist will bring or ship to the PNCC:
For samples prepared using a BSL2 protocol:	Please list the IBC protocol # and institutional training you have received to permit handling of such samples.
PNCC Access Badge Information	
Access Badges are required for PNCC access for all Unescorted Visitors/Visiting Scholars. These are issued once the unescorted visitor has completed all training and compliance. Visitors will be charged \$25 for a replacement badge. Signatures to be obtained in the following order:	
Unescorted Visitor/ Visiting Scholar Signature: By signing this form I attest to the validity of the information entered and to comply with all applicable U.S. Export Control regulations:	
Name: _____	Sign: _____ Date: _____
Required Approval	
The PNCC will notify the Export Control Officer before any changes to the Scope of Work.	
Name: <u>Claudia López</u>	Sign: _____ Date: _____