

## Remote Research Review Form

|                      | RMATION:                 |                  |   |                           |
|----------------------|--------------------------|------------------|---|---------------------------|
| Today's Date         |                          |                  |   |                           |
| Pitt Contact Nam     |                          |                  |   |                           |
| Pitt Contact Ema     |                          |                  |   |                           |
| Pitt Contact Pho     |                          |                  |   |                           |
| School & Department  |                          |                  |   |                           |
| the Pitt individuals | who will be co           | onducting remote | ool/department, general classification cho eresearch. Classification cho and Other. If Other is used, ple | ices include: Faculty,    |
| Name                 | School/Dep               | partment         | General Classification  | Citizenship               |
|                      |                          |                  |   |                           |
| LOCATIONS: Ple       | ease list the city       | y and country w  | here the above named individu   | ual(s) will be conducting |
|                      |                          |                  |   | ual(s) will be conducting |
|                      | ease list the city       |                  | here the above named individu   | ual(s) will be conducting |
|                      |                          |                  |   | ual(s) will be conducting |
| ACTIVITIES: Spe      | City ecifically list th  | Cou              |   |                           |
| ACTIVITIES: Spe      | City ecifically list the | Cou              | ntry or Region  | ith a summary of the      |
| ACTIVITIES: Spe      | City ecifically list the | Cou              | ntry or Region that requires review along wi  | ith a summary of the      |
| remote research.     | City ecifically list the | Cou              | ntry or Region that requires review along wi  | ith a summary of the      |

Please submit the completed form to the Office of Trade Compliance at: <u>TradeCompliance@pitt.edu</u> for evaluation. Once the review is complete, you will receive back an email with our review results. OTC will contact the Pitt contact name provided on this form if there are any questions.

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