



7. Is this a research project?      YES      NO

Additional Notes/Comments:

8. Who is funding the activity/program?

9. Are there clinical activities involved?      YES      NO

Additional Notes/Comments:

10. Will the program generate revenue?      YES      NO

If yes, describe the payment.

If yes, will the payments be made in the foreign country or in the US?

11. Will any of the following be needed in country:

Payments	YES	NO
Receipts	YES	NO
Bank Accounts	YES	NO
Office space for more than 90 days	YES	NO
Lab space for more than 90 days	YES	NO
Living space for more than 90 days	YES	NO
Equipment	YES	NO