

GUEST DATA SHEET

Please provide the following information. Items in **Red** are required for entry into our system.

Have you ever been at Caltech before? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please provide Caltech UID:			
Last (Family) Name:	First (Given) Name:	M. I.	Birth Date (mm/dd/yyyy):
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	Mobile Telephone Number:	Email Address*:	
Local Residence - Street Address:			
City:	State:	Postal Code:	
Are you currently enrolled in a degree program? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, provide school name:	
Current Employer Name:		Employer Location (City, State and Country):	
Are there intellectual property issues? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain.			
<u>Please complete if you are a foreign national:</u>			
_____ (Initials) To the extent that I am not a U.S.citizen or permanent resident, I certify that I have an appropriate nonimmigrant status that authorizes me to be present in the United States and allows me to participate in this guest activity.			

Primary Emergency Contact:		
First Name:	Last Name:	M. I.
Relationship: <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Parent <input type="checkbox"/> Guardian <input type="checkbox"/> Sibling <input type="checkbox"/> Friend <input type="checkbox"/> Domestic Partner <input type="checkbox"/> Other		
Emergency Contact Telephone (must have at least one phone number):		

I understand that I must provide proof of full vaccination against COVID-19 prior to starting my assignment at Caltech. Information on how to submit proof of vaccination can be found [My COVID-19 Vaccination Documentation](#).

Guest Signature: _____ **Date:** _____

Caltech Division/Department please continue to page 2.

Guest Name: _____

Caltech Division/Department Only:

Start Date (mm/dd/yyyy):	End Date (mm/dd/yyyy):	Division/Department Name and Mail Code:
Detailed Description of Guest Activity:		
Caltech Sponsor Name:	Caltech Division/Department Contact Name:	
Type of Access: <input type="checkbox"/> Electronic/Remote <input type="checkbox"/> On Campus	Relationship between Guest and Caltech Sponsor:	
If Guest is a foreign person or residing/working outside of the US, has this assignment been reviewed and approved by Caltech Export Compliance Office? <input type="checkbox"/> Yes <input type="checkbox"/> No		

This is confirmation you have reviewed the Guest Guidelines and this Guest will not be used as a substitute for or displace a Caltech employee position. If the Guest was previously employed by Caltech, you are confirming that the Guest will not be performing any work that is the same or similar to the duties performed while they were previously employed by Caltech.

Sponsor Signature: _____ **Date:** _____

Department/Division Approval Signature: _____