



**TECHNOLOGY CONTROL PLAN (TCP)**

**Purpose of Amendment:**

<b>The following parts of the Technology Control Plan (TCP) are being amended:</b>			
Part I: Project Completion Date Extension		Original Project Completion Date	
		Amended Project Completion Date	
Part II – VIII: Miscellaneous Amendments (please give a brief explanation)			
Part IX: Addition or Removal of Personnel (please give a brief explanation)			

<b>Principal Investigator:</b> As principal investigator, I have developed this Technology Control Plan Amendment to adequately safeguard the export controlled materials and/or information that will be used or developed during this research project. I attest to the veracity of this plan and understand that I am responsible to ensure that this research project is carried out in accordance with this plan.					
Name		UM Unique Name		Citizenship	
Title		Department			
Signature		Date		EC Training Completion Date	

<b>Export Control Information: (TO BE COMPLETED BY ORSP &amp; EXPORT CONTROL OFFICER)</b>					
Related PAF Numbers					
<b>Approval of UMOR Export Control Review Committee:</b>					
The University of Michigan Export Control Review Committee reviewed and approved this Technology Control Plan Amendment on _____.					
<b>Approval of Export Controls Officer:</b>					
Name	Krista Campeau		Title	Export Controls Officer	
Address	3003 State Street, Room 1024 Ann Arbor, MI 48109-1274	Phone	(734) 615-0672	Email	kcampeau@umich.edu
Signature				Date	

## Part II – VIII: Miscellaneous Amendments:

Please describe the part of the underlying TCP that is being amended.

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## Part IX: Personnel Changes

The following Personnel are to be added to the TCP:

**Additional Investigators:** I hereby certify that I have read this Technology Control Plan and have received a copy. I understand and agree to follow the procedures outlined in the plan. I understand that I could be held personally liable if I unlawfully disclose, regardless of format, export controlled information to unauthorized persons.

Name		UM Unique Name		Citizenship	
Title		Department			
Signature		Date		EC Training Completion Date	
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Title		Department			
Signature		Date		EC Training Completion Date	
Name		UM Unique Name		Citizenship	
Title		Department			
Signature		Date		EC Training Completion Date	
Name		UM Unique Name		Citizenship	
Title		Department			
Signature		Date		EC Training Completion Date	

**The following Personnel are to be removed from the TCP:**

Name		UM Unique Name		Citizenship	
Title		Department			
Signature		Date		EC Training Completion Date	
Name		UM Unique Name		Citizenship	
Title		Department			
Signature		Date		EC Training Completion Date	
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Title		Department			
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Title		Department			
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Name		UM Unique Name		Citizenship	
Title		Department			
Signature		Date		EC Training Completion Date	