NASA Foreign Visitor Information Sheet For International Laser Ranging Workshop GGAO Facility Tour October 9, 2002

Dear Sir/Madam:

In order to facilitate your planned/requested participation in the GGAO Facility Tour on October 9, 2002, please provide the information on the attached sheet no later than **Friday, August 23, 2002**. This information should be faxed to Kathy Regul at 301-345-4659, Westover Consultants for Carey Noll and John Degnan, NASA Goddard Space Flight Center.

REMINDER:

ALL foreign visitors must complete the Foreign Visitor Information Sheet (http://cddisa.gsfc.nasa.gov/lw13/foreign_visitor.pdf) and fax a copy of your visa and/or passport with photo. If you are a foreign visitor and are a citizen from a country that appears on the Designated Area List of Countries (http://cddisa.gsfc.nasa.gov/lw13/designated_countries.html) we ask that you also fax a brief bio or resume. If you are a foreign visitor, and you are a citizen of any country not listed in the Designated Area List of Countries, you do not need to fax a copy of your bio/resume.

This information should be faxed to Kathy Regul at 301-345-4659, Westover Consultants for Carey Noll and John Degnan, NASA Goddard Space Flight Center.

Thank you in advance for your cooperation.

NASA Foreign Visitor Information Sheet for the International Laser Ranging Workshop GGAO Facility Tour October 9, 2002

(Please TYPE OR PRINT)

First Name:				
Middle Name or Initial or NMI (No Middle Initi	al):		
Last (or Family) Name:				
Last (or Family) Name: U.S. Social Security Number (if	applicable):			
Are you a Permanent Resident A		l Holder): No _	Yes	
If Yes, Number:				
Date Issued (mm/dd/yyyy):		_		
Expiration Date (mm/dd/yyyy):				
Country of Citizenship:				
Date of Birth: Month	Day	Year		
ountry of Birth: City o		y of Birth:		
Permanent Home Address:				
NASA Installation to be visited:	Goddard Geon	hysical and Ast	ronomical Obse	ervatory (GGAO)
NASA Point of Contact: <u>Carey</u>		•		• ,
Planned dates of visit (inclusive)	· ·		e, Greenoen, iv	<u>1D 20771</u>
Trainined dates of visit (metasive)	j. <u>October 07, 2</u>	002		
Affiliation or Employer:				
Institution or Company N	Name:			
Street Address:				
City:				
State/Country:		_		
Zip Code:				
Title or Position and Dut	ies:			
Phone Number:				_
Fox Number:				
E-mail Address:				
L-man Address.				
U.S. Visa Information :				
U.S. Visa Type (e.g.; B-1	I/B-2, H-1B, J-1	, F-1, etc):		
Visa Expiration Date (mi	m/dd/yyyy):			
If J-1, name of U.S. Prog	gram Sponsor (at	tach IAP-66):		
Passport Information:				
Country of Issue: Passport Number:				
Passport Expiration Date				