

## ***Want To Hire An Affiliate?***

*Contact the BME Coordinator, Pat Jordan (pat.jordan@bme.gatech.edu)*

Note: All visitors needing access to a BME laboratory for research and other scholarly activities must:

- ✓ be processed by Georgia Tech's Office of Human Resources to be granted access.



The **Affiliate Application** should be completed by the PI of the host laboratory and returned to the Coordinator along with the **Personal Data Form** and **Security Questionnaire** that has been completed and signed by the prospective Affiliate.

Upon receipt of the application packet the Coordinator will review and forward the **Visiting Scholar Agreement** to the faculty host. The faculty host will need to complete key fields concerning the activities of the visitor. The visitor will then need to sign the agreement and return to the Coordinator for processing by Legal Affairs.

Once approved by Legal Affairs the Coordinator will contact the faculty host or designee to schedule an appointment with the visitor to finalize processing. **Initial appointments are for six months and can be renewed upon request.**

**THE WALLACE H. COULTER DEPARTMENT OF BIOMEDICAL ENGINEERING**  
*at Georgia Tech and Emory University*

***AFFILIATE STATUS APPLICATION***

Date of Request: \_\_\_\_\_

Sponsoring Investigator/Laboratory: \_\_\_\_\_

Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Applicant is a: (*Check one of the following*)

High school student Institution Name/Location \_\_\_\_\_

College Student Institution Name/Location \_\_\_\_\_

Researcher/Scholar Institution Name/Location \_\_\_\_\_

**Is the purpose of this affiliation to conduct or participate in research activities?**  Yes  No

**If no, explain purpose for affiliation:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**If yes, answer all of the following questions:**

Type of research: \_\_\_\_\_

Provide detailed description of research activities \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Will activities involve:

a government project?  Yes  No If yes, account #(#'s) \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

animals?  Yes  No If yes, date visitor added to protocol. \_\_\_\_/\_\_\_\_/\_\_\_\_. Protocol # \_\_\_\_\_

human subjects?  Yes  No If yes, date visitor added to protocol. \_\_\_\_/\_\_\_\_/\_\_\_\_. Protocol # \_\_\_\_\_

chemicals?  Yes  No

**Note:** *Please allow minimum 1 week for processing and you will be contacted via email with the next actions that need to be taken to confirm the Affiliate Status. Appointments must be renewed every six (6) months unless otherwise specified.*

Student Employee?  Yes  No

Print clearly using black or blue ink.

Personal Information	
<b>Name:</b>	_____
	(Last) <span style="margin-left: 200px;">(First)</span> <span style="margin-left: 100px;">(Middle Name / Initial)</span>
<b>SSN:</b>	_____ - _____ - _____
<b>gtID#:</b>	_____
<b>Local Address:</b>	_____
	(All correspondence will be sent to this address) (Number & Street)
	_____
	(City) <span style="margin-left: 100px;">(State)</span> <span style="margin-left: 100px;">(Zip)</span> <span style="margin-left: 100px;">(County)</span>
<b>Personal Telephone #:</b>	(_____) _____ - _____
<b>GT Work Telephone #:</b>	(_____) _____ - _____
<b>Indicate home information you wish included in GT online and printed faculty/staff directories:</b>	
<input type="checkbox"/> Home address and phone number <input type="checkbox"/> Home phone only <input type="checkbox"/> Home address only <input type="checkbox"/> No home information (default)	
<b>Gender:</b>	<input type="checkbox"/> M <input type="checkbox"/> F
<b>Marital Status:</b>	<input type="checkbox"/> Married <input type="checkbox"/> Single

Educational Information	
<b>Please indicate the highest education level achieved (check one):</b>	
<input type="checkbox"/> H.S. Credit	<input type="checkbox"/> Associate Degree (2 yr. College)
<input type="checkbox"/> H.S. Diploma / GED	<input type="checkbox"/> Bachelor's Degree
<input type="checkbox"/> Some College	<input type="checkbox"/> Some Graduate Credit
<input type="checkbox"/> Master's Degree	<input type="checkbox"/> Doctorate: Academic (PhD, EDD, DSC, DGA)
<input type="checkbox"/> Specialist - EDS	<input type="checkbox"/> Post Doctoral Credit
<input type="checkbox"/> Doctorate: Professional (DVM, MD, DDS, JD)	<input type="checkbox"/> ABD - All but dissertation
Please list degrees (associate degrees and above):	
<b>Degree</b>	<b>Major</b>
<b>Awarding Institution</b>	<b>Month/Year Awarded</b>
GTRI student employees:	
<b>Degree Pursuing</b>	<b>Major</b>
<b>Name of Institution (if other than Georgia Tech)</b>	

Other Information	
<b>Date of Birth:</b> ____/____/____	<b>Birthplace:</b> _____
	(Month / Day / Year) <span style="margin-left: 200px;">(City)</span> <span style="margin-left: 100px;">(State)</span> <span style="margin-left: 100px;">(Country)</span>
<b>Citizenship Status:</b>	<input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Lawful Permanent Resident <input type="checkbox"/> Other (must complete Non-U.S. Citizen Form) _____
<b>Are you Hispanic or Latino? (Choose only one)</b>	
<input type="checkbox"/> No, not Hispanic or Latino <input type="checkbox"/> Yes, Hispanic or Latino (A person of Mexican, Puerto Rican, Cuban, South or Central American, or other Spanish culture or origin, regardless of race.)	
<b>What is your race? (Choose one or more races below)</b>	
<input type="checkbox"/> <b>American Indian or Alaska Native</b> (A person having origins in any of the original peoples of North and South America, including Central America, and who maintains tribal affiliation or community attachment.) <input type="checkbox"/> <b>Asian</b> (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, Vietnam and Laos.) <input type="checkbox"/> <b>Black or African American</b> (A person having origins in any of the black racial groups of Africa.) <input type="checkbox"/> <b>Native Hawaiian or Other Pacific Islander</b> (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.) <input type="checkbox"/> <b>White</b> (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)	
<b>Previous GT Employee?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <b>(Approx. Dates):</b> _____
<b>Previous Georgia State Agency / University System of Georgia Employee?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <b>(Approx. Dates):</b> _____
	<b>Agency/Institution Name:</b> _____
<b>GT Home Dept.:</b>	<b>Job Title:</b>
_____	_____
<b>Emergency Contact Person:</b>	<b>Relationship:</b>
_____	_____
<b>Address (if different from employee):</b>	
_____	
(Number & Street)	
_____	
(City) <span style="margin-left: 100px;">(County)</span> <span style="margin-left: 100px;">(State)</span> <span style="margin-left: 100px;">(Zip)</span> <span style="margin-left: 100px;">(Country)</span>	
<b>Emergency Telephone:</b>	(_____) _____ - _____



# PERSONAL DATA FORM

## Veteran Status / Military Status Codes

**Veteran Status (choose all that apply):**

Non Veteran (N)

Recently Separated Veteran

Date of Discharge: \_\_\_\_\_

Military Status Codes:

Active Reserve (R)

*Definitions on Page 2*

Vietnam Era Veteran (V)

Other Protected Veteran (O)

National Guard Active (G)

Disabled Veteran (D)

Armed Forces Service Medal Veteran (M)

**Have you ever been convicted of a crime? Please check one box:**  Yes  No

If your answer above is “yes” to a conviction, check all that apply:

Felony?  Yes  No

Misdemeanor?  Yes  No

**Are any charges currently pending against you for any violation of any federal law, state law, county, military, or municipal law, regulation, or ordinance?**  Yes  No

For the purposes of this application process, criminal convictions include any adjudication of guilt by a judge or jury for any crime. This does not include minor traffic offenses, but does include “no contest” pleas, first-offender treatment, convictions under appeal and pardoned convictions. Minor traffic offenses are those that do not involve driving while under the influence of alcohol or other drugs and did not result in imprisonment and/or an imposed fine of less than \$250. If you have been convicted of a crime in any jurisdiction for any violation of any federal law, state law, county, military, or municipal law, regulation, or ordinance, we may need for you to provide the official documentation of the conviction from an authorized law enforcement agency prior to starting work with this institution.

If your answer is yes to any of these questions, list the conviction or pending charge below. Include those that resulted in paying a fine of more than \$250, being put on probation, and/or incarceration (jail time). If you need more space, please provide us with the complete explanation on a separate page.

Conviction Charges or Pending Charges	Date	City/State of Conviction or Pending Charge

NOTE: Convictions and the nature of your affiliation with Georgia Tech will be taken into consideration prior to engagement of work.

**You have completed the basic information. Please print the packet, review the information and sign where indicated. Please hand the packet to the Customer Service Representative for processing. Thank you.**

### Definitions on Veterans

**Recently Separated Veteran:** a veteran during the three-year period beginning on the date of such veteran’s discharge or release from active duty in the U.S. military, ground, naval or air service. A discharge date must be listed for any person who is a recently separated veteran according to this definition.

**Armed Forces Services Medal Veteran:** a veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces Services Medal was awarded pursuant to Executive Order 12985. A veteran’s discharge form (DD Form 214) indicates whether a veteran received a service medal.

**Disabled Veteran:** (i) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans’ Affairs or (ii) a person who was discharged or released from active duty because of a service connected disability.

**Vietnam Era Veteran:** a person who: (i) served on active duty in the U.S. military, ground, naval or air service for a period of more than 180 days, and who was discharged or released there from with other than a dishonorable discharge, if any part of such active duty was performed: (A) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in all other cases; or (ii) was discharged or released from active duty in the U.S. military, ground, naval or air service for a service-connected disability if any part of such active duty was performed (A) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in any other location.

**Other Protected Veteran:** a veteran who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized.



Georgia Institute of Technology  
**SECURITY QUESTIONNAIRE**

NOTICE: The Sedition and Subversive Activities Act of 1953 (Ga. Laws, 1953), as amended, requires each individual utilizing public facilities on a campus of the Georgia Institute of Technology or acting in an adjunct role, to complete and sign a questionnaire which is designed to establish that there are no reasonable grounds to believe that he/she is a subversive person. A subversive person is defined as one who commits acts, advocates, or teaches the overthrow of the government of the United States or government of the State of Georgia by force or violence or who is a knowing member of a subversive organization.

INSTRUCTIONS: Prepare in original only. Fill in all items. If more space is needed for any item, or explanation, continue under Item 5. Please type or print in ink.

**1 Name** \_\_\_\_\_

Other Names Used: (Maiden name, names by former marriages, former names changed legally or otherwise: Aliases, nicknames, etc. Specify which, and show dates used.)

**2 Address** \_\_\_\_\_

(Street and No.)

(City)

(State)

(Phone No.)

**3(A) Have you ever been convicted of a crime? Please check one box:**  Yes  No

If your answer above is "yes" to a conviction, check all that apply:

Felony?  Yes  No

Misdemeanor?  Yes  No

**3(B) Are any charges currently pending against you for any violation of any federal law, state law, county, military, or municipal law, regulation, or ordinance?**  Yes  No

For the purposes of this application process, criminal convictions include any adjudication of guilt by a judge or jury for any crime. This does not include minor traffic offenses, but does include "no contest" pleas, first-offender treatment, convictions under appeal and pardoned convictions. Minor traffic offenses are those that do not involve driving while under the influence of alcohol or other drugs and did not result in imprisonment and/or an imposed fine of less than \$250. If you have been convicted of a crime in any jurisdiction for any violation of any federal law, state law, county, military, or municipal law, regulation, or ordinance, we may need for you to provide the official documentation of the conviction from an authorized law enforcement agency prior to starting work with this institution.

If your answer is yes to any of these questions, list the conviction or pending charge below. Include those that resulted in paying a fine of more than \$250, being put on probation, and/or incarceration (jail time). If you need more space, please provide us with the complete explanation on a separate page.

Conviction Charges or Pending Charges	Date	City/State of Conviction or Pending Charge

**Note: Convictions and the nature of your affiliation with Georgia Tech will be taken into consideration prior to engagement of work.**

Note: Before signing this form, check all answers and explanations to see that you have answered all questions fully and correctly. This form is to be executed under oath subject to the penalties of false swearing as prescribed in Code Section 26-2402 of the Criminal Code of Georgia.



Georgia Institute of Technology  
**SECURITY QUESTIONNAIRE**

**Affidavit of Verification**

State of \_\_\_\_\_ County \_\_\_\_\_

Personally appeared before the undersigned attesting officer, duly authorized to administer oaths, \_\_\_\_\_  
(Print Name)

who, after being sworn, deposes and says and declares under penalties of false swearing that he or she is the person who executed the foregoing instrument; that he or she has read and completed the same and knows and understands the contents thereof; that the matters stated therein and the answers and information furnished by him or her in the foregoing questionnaire, including any attachments thereto, are true and correct.

SWORN TO AND SUBSCRIBED BEFORE ME \_\_\_\_\_  
(Signature of Employee, Affiliate or Adjunct)

This \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_

\_\_\_\_\_  
(Notary Public)

County of \_\_\_\_\_ My commission expires \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_  
(Affix Seal)

**Board of Regents University System of Georgia  
Loyalty Oath**

State of \_\_\_\_\_ County \_\_\_\_\_

I, \_\_\_\_\_, a citizen of \_\_\_\_\_  
(US State/Non-US Country)

will use public facilities on the campus of the Georgia Institute of Technology and I do hereby solemnly swear and affirm that I will support the Constitution of the United States and the Constitution of the State of Georgia.

This \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_  
(Signature of Employee, Affiliate or Adjunct)

Sworn to and subscribed before me this day and year above set out.

\_\_\_\_\_  
(Notary Public)

(Affix Seal)

PLEASE NOTE THAT EACH OF THE ABOVE DOCUMENTS, THE SECURITY QUESTIONNAIRE AND THE LOYALTY OATH, MUST BE SIGNED AND NOTARIZED. COS B-11-0801