

# Foreign National Visitor/Guest Form

## Great Lakes Environmental Research Laboratory

Please complete all fields and return via fax at (734) 741-2263

*\*Passport ID required to show upon entry*

Name: \_\_\_\_\_

(Last, First and Middle)

Date of Birth – MM/DD/YYYY \_\_\_\_\_

Gender: Male \_\_\_ Female \_\_\_

Passport Number \_\_\_\_\_ Issuing Country \_\_\_\_\_

Place of Birth (City/State and Country) \_\_\_\_\_


Country of Citizenship (List all if Dual) \_\_\_\_\_

Country of Permanent Residence \_\_\_\_\_

 Sponsor's Name \_\_\_\_\_

Arrival Date at GLERL \_\_\_\_\_ Departure Date at GLERL \_\_\_\_\_

Purpose of Visit:

 mail: \_\_\_\_\_

PERSONALLY IDENTIFIABLE INFORMATION