# Technology Control Plan Closeout Form



Closure of an active Technology Control Plan requires the PI and any co-PI(s) to affirm that controlled data/information is authorized to be disseminated/published or properly archived to avoid unauthorized disclosure. Please complete once a project is fully closed out. Return the document to:

1735 NDSU Research Park Dr.

Fargo, ND 58102 phone: 701.231.6455 fax: 701.231.8098

ndsu.exportcontrols@ndsu.edu

A closeout review will be scheduled thereafter.

Section A. Technology Control Plan Information	
Project Title:	
Principle Investigator (PI):	
Section R. Access and Distribution Status	

### **Publication Status**

The sponsor has allowed all of the data/information generated from this project to be published or presented openly.

The sponsor allowed some of the data to be published or presented openly.

All of the data generated from this project remained restricted.

#### **Student Thesis**

This work supported student thesis If yes, Name of project(s) which remain confidential. Student

This work supported student thesis project(s)

If yes, Name of which were approved for open publication.

Student

This work did not support student thesis project(s).

#### **Current/Future Data Access Status**

Our research team retains restricted data or equipment for the purpose of data/record retention, but has no plans to continue research with it at this time. (Describe secure storage parameters in Section C below).

Our team no longer possesses any data or equipment that require controls on physical access for export control purposes. (Describe disposal procedures in Section C2b below).

#### **Current/Future Physical Access**

I have evaluated the possession of badge/key/physical access to any areas that were specifically segmented for the project.

Equipment or hard copy data I am retaining is locked in an appropriate location under at least two levels of security with access limited to approved persons with need-to-know.

All equipment/hardware received and/or generated has been returned to the sponsor.

#### **Continuation Efforts**

I plan to continue this work for other projects (funded or unfunded) Explain:

I plan to utilize discoveries/developed equipment and process modifications/data and data derivatives from this project for future work. Explain:

# Section C. Disposition

#### Retention - The research team will keep (Check all that apply)

Category

Retention Period - (specific length, date or indefinite)

Controlled Equipment/Test Articles

Hard Copy Controlled Data/Information

Electronic Controlled Data/Information

Other - Explain:

Storage – for those items indicated above that will be retained, outline the security measures.

Physical Items:

Electronic data/information

Disposal - plan for disposal after an appropriate record retention period.

Physical Items (hardcopy documents must be securely destroyed by cross-cut shredding or another method that ensures information cannot be reconstructed.)

Electronic data/Information (Once a system housing export-controlled data has reached the end of its usable life, its hard drive or other non-volatile media should be securely wiped using SDelete, DBan, or other secure overwriting utility. Information on shredding software can be found at http://dban.sourceforge.net/. NDSU IT staff may also be engaged in any electronic data destruction or deletion process to ensure appropriate disposal. Digital deletion of the entire device is the preferred solution).

# Section D. Technology Control Plan Closure Acknowledgement Statement

At this time, this project is closed. Data that was not allowed to be put into the public domain has been either destroyed, returned to the sponsor, or securely stored per the provisions above. I will not begin work with this data without prior approval from the sponsor and the NDSU Export Control Administrator (ECA). If I plan to utilize controlled data from this project for any new purpose, or suspect unauthorized access or use, I will contact the ECA (ndsu.exportcontrols@ndsu.edu) for assistance in creating a new Technology Control Plan. I understand that I will be contacted by the ECA to schedule and complete a close out review of this project plan.

Principle Investigator Signature and Date:

Co-Principle Investigator Signature and Date: