ROWAN UNIVERSITY

RESTRICTED PARTY SCREENING LIST

The U.S. Government maintains various lists of entities for which there are restrictions on doing business. The Bureau of Industry and Security (BIS) recommends that these lists be reviewed to ensure that a proposed transaction does not violate regulations. Each RU employee is responsible for ensuring that all persons or entities have been screened prior to engaging in business activities, to confirm that the person or entity does not appear on any of the 200+ agency lists of denied/excluded parties. RU will assist employees in screening against pertinent U.S. Government lists that prohibit certain transactions with organizations and individuals including those that especially involve Designated Nationals and Blocked Persons (SDN) lists. All RU personnel, irrespective of their employment status will be screened against federal debarment and suspension lists before any federal funds are released.

Persons / Entities who are identified on a denied/excluded party list will be investigated to ensure the result is a true match. Even a true match may not mean that no University business can be conducted with such persons. Specific license requirements, terms and conditions, or other factors may apply. The University will conduct detailed due diligence to ensure full compliance with restrictions for the parties on these lists, under the authority of:

* Department of Treasury Office of Foreign Assets Control (OFAC) Sanctions
* Department of Commerce Bureau of Industry and Security (BIS) Denied Persons List
* Department of Commerce BIS Entity List and Unverified List
* Department of State Arms Export Control Act Debarred Parties
* Department of State Designated Terrorist Organizations
* Department of State Nonproliferation Orders

To receive assistance in screening please complete the following form:

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|  **Principal Investigator & Key Personnel:** |
| **Principal Investigators Name:**  | **Potential Sponsor**  |
| **Phone Number:**  | **Fax Number:**  | **Pager or Cell Number:**  |
| **E-mail address:**  | **Department:**  |
| **Position: [ ]  Faculty / [ ]  Staff / [ ]  Investigator / [ ]  Student [ ]  Other (**describe below): |
|  | ***Other (describe your position):***  |

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| **List all organizations involved in the project. Provide contact information for each of the organizations. If the list is more than ten, copy this form to include additional organizations.** |
| **Name of the organization** | **Contact Information** |
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| **Provide names and Citizenship of everyone involved in the project. If the list is more than ten names, copy this form to include additional names and their citizenship.** |
| **Name**  | **Citizenship** |
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| Original Signature of Principal Investigator | Date:  |