

In the course of its engagement with you, FlightSafety International would like to collect and use certain personal information about you.

Personal Identifiable Information we Collect	Intended Use of Information
<ul style="list-style-type: none"> • Full Legal Name • Country of Birth • Citizenship • US Permanent Resident Card Status • Name of your Company/Organization 	<ul style="list-style-type: none"> • Site Visit Request • Complying with US export and import laws, regulations, and rules. • Restricted denied parties screening

**To ensure compliance with Office of Foreign Assets Control (OFAC) and other government regulations, we may transfer your full name, country of residence, and organization to a third-party provider application called "Visual Compliance." Visual Compliance runs a check against the US Government Consolidation Screening List (CSL). Your data will remain in that vendor database for at least five years. The data elements are continually processed to ensure there are no matches to denied or restricted parties lists.*

FlightSafety International may share the above personal information, in whole or in part, with other members of FlightSafety International, to be used for the same purposes for which such personal information was originally collected, and in order to facilitate business you may wish to conduct with FlightSafety International. In the course of such sharing, the personal information may be transferred to recipients located in other countries ensuring an "adequate level of protection" under the EU General Data Protection Regulation (GDPR), or to third parties whose engagement with FlightSafety International includes Standard Contractual Clauses to ensure an adequate level of protection of personal information.

Please note that you can withdraw your consent at any time by contacting Teammate Resources at HRSimulation@FlightSafety.com. After you withdraw your consent, FlightSafety International will cease the further processing of your personal data for the above mentioned purpose, unless FlightSafety International is entitled to such further processing under the applicable data protection laws.

If you withhold consent, we cannot permit you to enter the facility.

For more detailed information on the processing of your personal data by FlightSafety International and your rights under the applicable data protection laws, please read our [privacy notice](#) and [privacy policy](#). A paper copy is available upon request from our Data Protection and Privacy Office at DataProtection@FlightSafety.com.

BY EXECUTING THIS FORM, I INDICATE THAT I ACKNOWLEDGE AND AGREE TO THE PROCESSING OF MY PERSONAL INFORMATION IN ACCORDANCE WITH THE ABOVE:

Visitor Information Form

Date(s) of Visit*	To	FSI Site Location*	Simulation	(SMO Code: 318666)
Form is valid for 365 days from date of visit for <u>US</u> Persons		Have you ever been employed at FlightSafety? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Host(s) visiting*				
Personal Information				
Full Legal Name* <i>(Last, First, Middle)</i>			Country of Birth*	
Citizenship(s)* <i>(List all Country(ies))</i>		If not U.S. Citizen, do you have a U.S. Permanent Resident Card?*		<input type="checkbox"/> Yes <input type="checkbox"/> No
Corporate Information				
Representing <i>(Employer's Name)*</i>				
Employer Address* <i>(Street Address – No PO Box, City, County/State, Postal/Zip Code, Country)</i>				
Employer Website Address*				
Employer's Parent Company* <i>(Company Name)</i>				
Is your Employer incorporated in the United States?*			<input type="checkbox"/> Yes <input type="checkbox"/> No	
If answer is No: In which country is your Employer incorporated?				

Visitor listed above must read the following and sign below and return completed form with appropriate documents to HRSimulation@flightsafety.com

In consideration of my admission to FlightSafety facility(ies):

1. I have attached my proof of Citizenship documents if I am a U.S. Citizen (or in lieu of documents, I have submitted a JPAS visit request). If I am not a U.S. Citizen, I have attached a copy of my U.S. Permanent Resident Alien card, or a copy of my passport and Visa. **(Acceptable Proof of Citizenship documents for U.S. Citizen: Passport, Birth Certificate, Voter Registration I.D., C.D.I.B. Card, or Military I.D.);**
2. If JPAS visit request has been submitted, enter visiting SMO Code and date of visit notification: _____
3. I will present a government issued photo ID when I arrive at FlightSafety.
4. I will wear the FlightSafety-issued visitor badge at all times in a visible manner.
5. I will not use a camera, take a picture, or take a video at any time in the FlightSafety facility(ies).
6. I will wear proper attire, personal protective equipment, and footwear (closed toe, closed heel, low heel) on the production floor as required.

If FlightSafety does not have an existing non-disclosure agreement with Visitor or Visitor's employer that is applicable to Visitor's visit to the FlightSafety facility(ies), then in consideration of Visitor's admission to FlightSafety facility(ies), Visitor agrees:

1. To maintain in confidence and not reproduce or disclose to any person any information disclosed to Visitor in writing, orally, or by Visitor's observation during Visitor's visit ("information"), except information that Visitor can show is readily available from public sources otherwise, than by a breach of this agreement;
2. To use information, in whole or in part, solely for the purpose of the visit to the FlightSafety facility and not for any purpose that does not benefit FlightSafety directly;
3. Upon request, to return to FlightSafety all information (including images of the information and all information derived from the information); and
4. Not to export, re-export, or transship any information except in accordance with the International Traffic in Arms Regulation (ITAR). 22 C.F.R. Part 120 et seq., the Export Administration Regulation (EAR), 15 C.F.R. Part 730 et seq., or any other export control laws or regulation of the United States or of any other country, as applicable.

Print Name and Title*	Signature*	Date*
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Email completed and signed form with requested documentation to the restricted address: HRSimulation@flightsafety.com

Disclaimer: Required fields have red asterisks (), we need to collect this information to process the visitor information form with all the necessary information. If the required fields are not appropriately filled out, the form will be sent back to you for more information. This document has been classified as **CONFIDENTIAL**.*