

Northrop Grumman Aerospace Systems Intern New Hire Package

Welcome to Northrop Grumman Aerospace Systems. Once you accept your offer, you will be required to complete the following pre-employment steps:

- ☐ **ON-BOARDING DIRECT ACCESS (ODA):** You will receive an email with a link to ODA where you can access and complete required forms as mentioned in your offer letter. Your offer letter contains your username and password to the ODA website. Please direct any ODA questions or concerns to your HR Service Center (HRSC) Representative when you are contacted. Note: if you are a returning intern who is still active in our HR system, you will not receive an email and are not required to complete online forms.
- ☐ **BACKGROUND INVESTIGATION:** All new employees and current employees who have not worked for the past 180 days are required to complete a background investigation. You will receive an email from **NGC Hiring** within 2-3 days after accepting your offer requesting you to complete online authorization to initiate the background investigation process. Please complete this requirement immediately to avoid delays in your start date. If your planned start date is more than 180 days from the time of your offer acceptance, a background investigation will be requested closer to your start date. Please note, you may be contacted by our pre-employment investigation vendor or a member of the Northrop Grumman Human Resource Center for additional information related to your background investigation.
- ☐ **DRUG SCREENING:** All new employees and current employees who have not worked for the past 180 days are required to complete a drug screening. You will receive an email from **NGC Onboarding** within 2-3 days after accepting your offer with instructions on how to schedule a drug screen. If your planned start date is more than 180 days from the time of your offer acceptance, Northrop Grumman will request a drug screen closer to your start date. Please complete this requirement within 48 hours of receiving the email to avoid any delays in your start date. A confirmation email will be sent to you once you identify a collection site. **Note:** Consent for Drug Screening form (C-378) must be completed by anyone who is under 18. This form requires a signature from your parent/guardian.
- ☐ **CLEARANCE: (Only if Applicable)** If you are being submitted for a security clearance, you will need to provide identification documentation, be fingerprinted, and/or complete information online in the eQIP system in order to initiate your clearance process. The Northrop Grumman DoD Clearance Office and Site Security will be contacting you directly to coordinate these activities.
- ☐ **CONFIRMATION TO START:** Once all of your pre-employment contingencies have been met, you will be confirmed to start and receive an email with Day 1 details from your HRSC Representative.
- ☐ **WORK PERMIT:** If you are under the age of 18 on your 1st day of employment, you are required to obtain a work permit. Please inform your Recruiter or Recruiting Associate so that we may send you the appropriate form.

Please review the following list of documents; complete and/or return forms as appropriate:

- Offer Response Quick Reference Guide
- List of Acceptable Documents for Form I-9, Employment Eligibility Verification – **NOTE:** you will be required to bring one (1) document in list A, *or* 1 each from Lists B and C with you on Day 1*. All documents must be **originals and unexpired.**
- Export Control Status Verification (C-638) – **NOTE:** you will be asked to complete this form **online** through Onboarding Direct Access (ODA); while you do not need to complete/return the form in this package, please bring one of the **original** documents listed on the form with you to New Hire Orientation on Day 1*.
- Applicant Drug Testing (C-378) – must be completed by anyone who is under 18 years of age at the time of drug screening; this form must be completed, signed by your parent/guardian and returned to your Recruiter.
- Post Offer Medical Questionnaire (C-562) - if you are requesting a reasonable accommodation, please complete this form and return it to your recruiter within 72 hours.

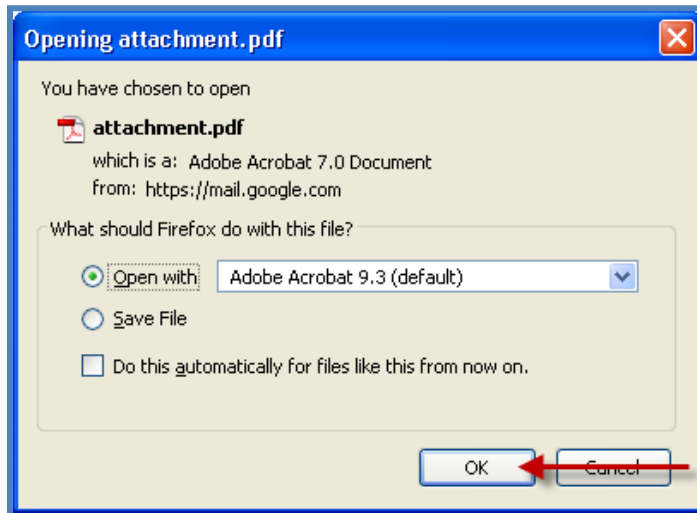
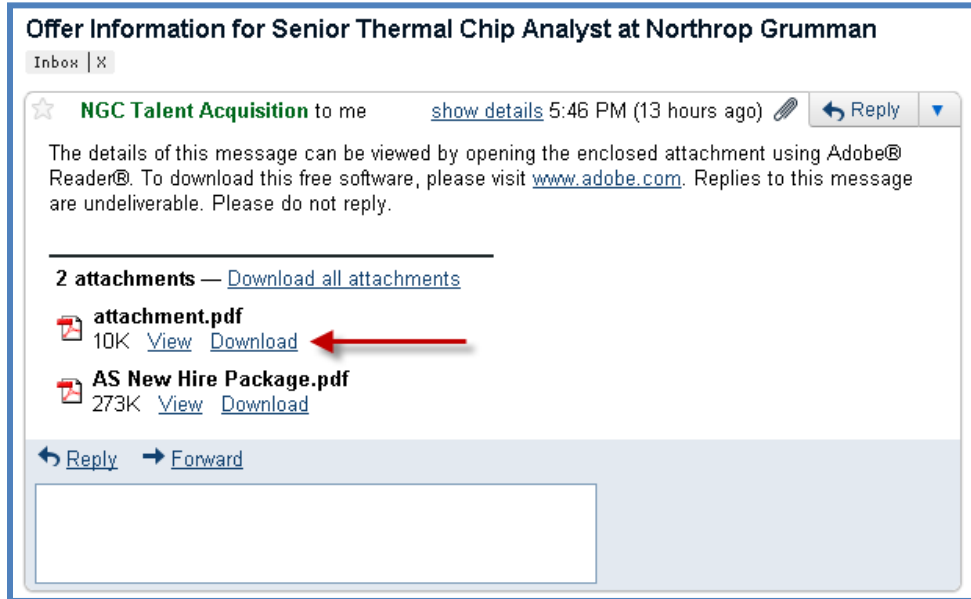
***Failure to bring these documents will cause a delay in your start.**

Offer Response Quick Reference Guide

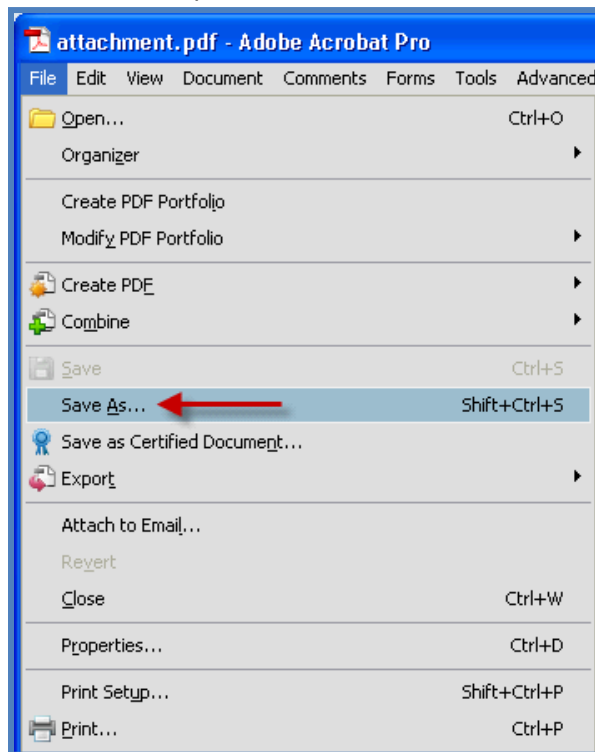
This quick reference guide contains step-by-step instructions to respond to your Northrop Grumman Offer Letter

Save your offer to your desktop:

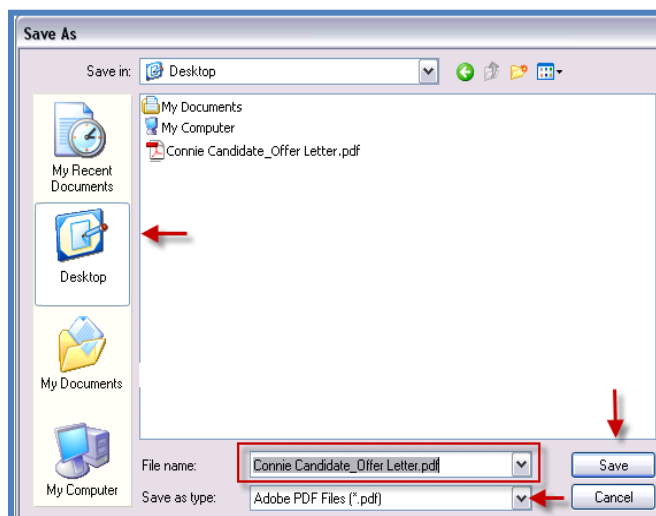
1. Open the Offer Letter attachment within your Offer email:



2. Click the "File" option, then click "Save As":



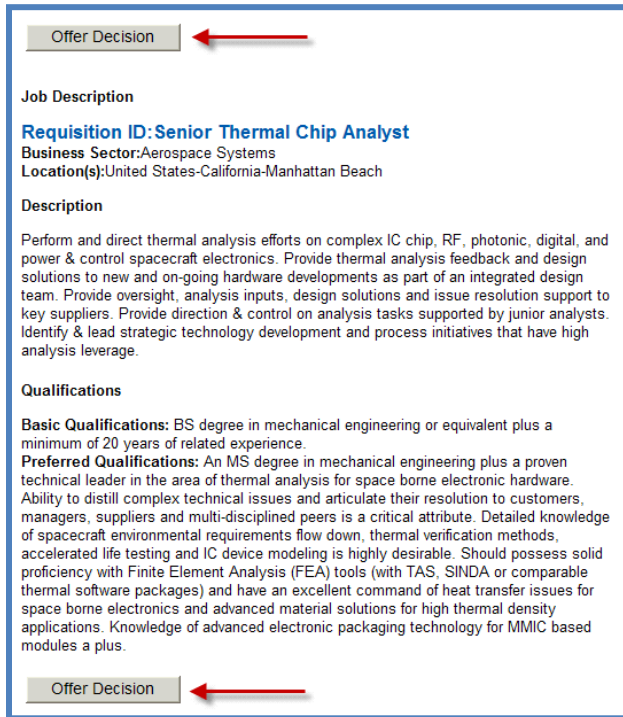
3. Click Desktop, name your file (as shown below), Save as Adobe PDF type and click Save.



Reply to your offer:

1. Please use the link provided in your offer letter to access our eOffer portal.

- Once you click on the “Login” link, you will be directed to the job page; click the “Offer Decision” button to continue to the login screen:



Offer Decision

Job Description

Requisition ID: Senior Thermal Chip Analyst
Business Sector: Aerospace Systems
Location(s): United States-California-Manhattan Beach

Description

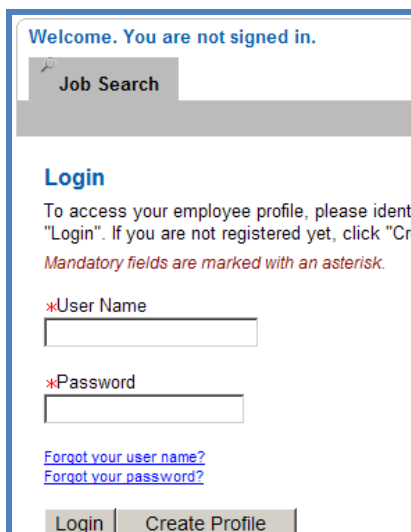
Perform and direct thermal analysis efforts on complex IC chip, RF, photonic, digital, and power & control spacecraft electronics. Provide thermal analysis feedback and design solutions to new and on-going hardware developments as part of an integrated design team. Provide oversight, analysis inputs, design solutions and issue resolution support to key suppliers. Provide direction & control on analysis tasks supported by junior analysts. Identify & lead strategic technology development and process initiatives that have high analysis leverage.

Qualifications

Basic Qualifications: BS degree in mechanical engineering or equivalent plus a minimum of 20 years of related experience.
Preferred Qualifications: An MS degree in mechanical engineering plus a proven technical leader in the area of thermal analysis for space borne electronic hardware. Ability to distill complex technical issues and articulate their resolution to customers, managers, suppliers and multi-disciplined peers is a critical attribute. Detailed knowledge of spacecraft environmental requirements flow down, thermal verification methods, accelerated life testing and IC device modeling is highly desirable. Should possess solid proficiency with Finite Element Analysis (FEA) tools (with TAS, SINDA or comparable thermal software packages) and have an excellent command of heat transfer issues for space borne electronics and advanced material solutions for high thermal density applications. Knowledge of advanced electronic packaging technology for MMIC based modules a plus.

Offer Decision

- Enter your User Name and Password: You will need to log in using the same User Name and password that you used to log in to the Career portal to apply for this position. If you do not know your User Name and password, please do not create a new profile. Please click “Forgot your user name?” and/or “Forgot your password?” and enter your email address and your user name and/or password will be sent to you. If you are still unable to login, please call or email your recruiter and he/she will send you your log-in information.



Welcome. You are not signed in.

Job Search

Login

To access your employee profile, please identify your User Name and Password. If you are not registered yet, click "Create Profile".

Mandatory fields are marked with an asterisk.


*User Name






*Password

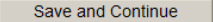
[Forgot your user name?](#)
[Forgot your password?](#)

Login **Create Profile**

2. Provide your decision, by selecting from the drop down menu.

Applying for: **Senior Thermal Chip Analyst (Job Number: 11005868)**  Step 1 out of 3



The field "Offer Decision" is mandatory.
The field "Please enter full name to indicate acknowledgement of decision:" is mandatory.

Offer Decision

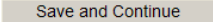
Please confirm your personal information and record your offer decision. Once you select your decision, please enter your full name as acknowledgement.

*First Name
Connie


*Last Name
Candidate






*Offer Decision
Not Specified
Not Specified
Accept
Reject

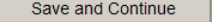
acknowledgement of decision:



3. eSign by typing your name. Click Save and Continue.

Applying for: **Senior Thermal Chip Analyst (Job Number: 11005868)**  Step 1 out of 3



The field "Offer Decision" is mandatory.
The field "Please enter full name to indicate acknowledgement of decision:" is mandatory.

Offer Decision

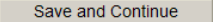
Please confirm your personal information and record your offer decision. Once you select your decision, please enter your full name as acknowledgement.

*First Name
Connie

*Last Name
Candidate

*Offer Decision
Accept

*Please enter full name to indicate acknowledgement of decision:
Connie Candidate



- Click the Browse button find Offer Letter saved to your desktop.

Applying for: **Senior Thermal Chip Analyst (Job Number: 11005868)** Step 2 out of 3 | [Print/Email](#)

Offer Decision Offer Letter Attachment Summary


Save and Continue

Offer Letter Attachment

*Please attach the offer letter that you accepted on the previous page. It must be attached here for your offer decision to be accepted.

Attachments should not include any classified or export controlled information.

Select the file to attach, then click "Attach"

[Browse...](#) 

[Attach](#)

Comments about the file

The attachment will be scanned to ensure it does not contain any viruses.

Tips

The search tool that recruiters use to search for candidates will not be able to analyze the content of some attached files, mostly image files and compressed files (.zip).

Attaching files
To attach a file, click "Browse" and select the file you want to attach. Then, click "Attach".

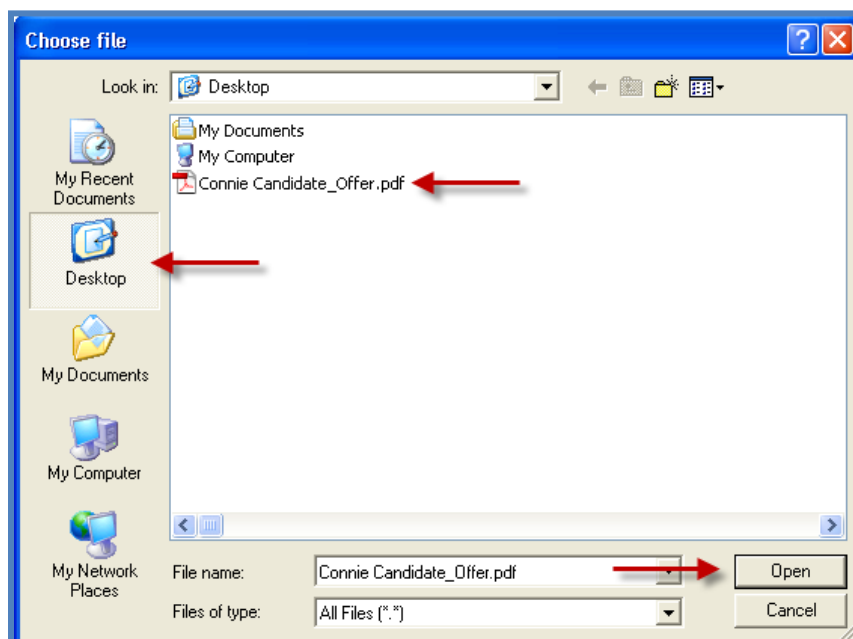
Deleting files
To delete a file, in the list of files already attached, select the file you wish to delete. Then, click the corresponding "Delete" button.

This section displays basic information regarding the files attached to the candidate record. You can delete some or all the files. The "Relevant Files" column allows you to select the files relevant to this job submission.

Relevant Files	File Name	Date	Comments	Actions
<input checked="" type="checkbox"/>	SC ME_resume.doc	3/22/11	This file includes a resume from which basic candidate information has been extracted.	Delete

Save and Continue

- Locate the file and click Open.



6. Click Attach and then click Save and Continue.

Applying for: Senior Thermal Chip Analyst (Job Number: 11005868)

Step 2 out of 3 | Print/Email

Offer Decision

Offer Letter Attachment

Summary

Save and Continue

Offer Letter Attachment

*Please attach the offer letter that you accepted on the previous page. It must be attached here for your offer decision to be accepted.

Attachments should not include any classified or export controlled information.

Select the file to attach, then click "Attach"

C:\Documents and Settings\s3843 Browse...

Attach

Comments about the file

The attachment will be scanned to ensure it does not contain any viruses.

Tips

The search tool that recruiters use to search for candidates will not be able to analyze the content of some attached files, mostly image files and compressed files (.zip).

Attaching files
To attach a file, click "Browse" and select the file you want to attach. Then, click "Attach".

Deleting files
To delete a file, in the list of files already attached, select the file you wish to delete. Then, click the corresponding "Delete" button.

This section displays basic information regarding the files attached to the candidate record. You can delete some or all the files. The "Relevant Files" column allows you to select the files relevant to this job submission.

Relevant Files	File Name	Date	Comments	Actions
<input checked="" type="checkbox"/>	SC_ME_resume.doc	3/22/11	This file includes a resume from which basic candidate information has been extracted.	Delete

Save and Continue

7. Click Submit:

Submit

Summary

This summary displays the information included in the job submission form. To modify some specific information, click "Edit" next to the relevant section.

Offer Decision | Edit

Connie G. Candidate
Granada Hills, 91344
United States—California—Santa Clarita

Offer Decision

Accept

Please enter full name to indicate acknowledgement of decision:

Connie Candidate

Offer Letter Attachment | Edit

Relevant Files	File Name	Date	Comments
Yes	SC_ME_resume.doc	3/22/11	This file includes a resume from which basic candidate information has been extracted.
Yes	Connie Candidate Offer.pdf	5/4/11	

Submit

If you experience any technical issues after you have followed the steps above, please contact your recruiter or recruiting associate.

LISTS OF ACCEPTABLE DOCUMENTS

All documents must be unexpired

LIST A

Documents that Establish Both
Identity and Employment
Authorization

LIST B

Documents that Establish
Identity

LIST C

Documents that Establish
Employment Authorization

OR

AND

1. U.S. Passport or U.S. Passport Card	1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	1. Social Security Account Number card other than one that specifies on the face that the issuance of the card does not authorize employment in the United States
2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)		2. Certification of Birth Abroad issued by the Department of State (Form FS-545)
3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa	2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address	3. Certification of Report of Birth issued by the Department of State (Form DS-1350)
4. Employment Authorization Document that contains a photograph (Form I-766)	3. School ID card with a photograph	4. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal
5. In the case of a nonimmigrant alien authorized to work for a specific employer incident to status, a foreign passport with Form I-94 or Form I-94A bearing the same name as the passport and containing an endorsement of the alien's nonimmigrant status, as long as the period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form	4. Voter's registration card	5. Native American tribal document
	5. U.S. Military card or draft record	6. U.S. Citizen ID Card (Form I-197)
	6. Military dependent's ID card	7. Identification Card for Use of Resident Citizen in the United States (Form I-179)
	7. U.S. Coast Guard Merchant Mariner Card	8. Employment authorization document issued by the Department of Homeland Security
	8. Native American tribal document	
6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI	9. Driver's license issued by a Canadian government authority	
	For persons under age 18 who are unable to present a document listed above:	
	10. School record or report card	
	11. Clinic, doctor, or hospital record	
	12. Day-care or nursery school record	

Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274)

EXPORT CONTROL STATUS VERIFICATION

Form C-638 (9-10)* Page 1 of 2

NORTHROP GRUMMAN

NORTHROP GRUMMAN HUMAN RESOURCES USE ONLY																							
SUBMISSION DATE (MM/DD/YYYY)								MYID NO.								CASE NO.							

The purpose of this form is to assist in verifying your export control status. U.S. laws and regulations prohibit the unauthorized export of restricted technology to certain persons. To comply with these legal requirements, Northrop Grumman must ascertain whether an individual who may be given access to restricted technology is a "foreign person" subject to these export control restrictions. Regardless of individual status, persons directly employed by an entity not organized or incorporated in the U.S., including Northrop Grumman affiliates, will be treated as foreign persons for purposes of access to restricted technology.

Certain categories of persons, referred to as "U.S. persons" who are employed by U.S. entities, are not considered foreign persons and do not need export licenses before being allowed access to restricted technology. The list of documents contained in section 1 should be used to verify someone is a U.S. person. If an individual whose export control status is being verified furnishes a document from the list in section 1 and indicates their employer is incorporated or organized in the U.S. in section 3, the individual is a U.S. person for export control purposes, and does not need an export license before being given access to restricted technology. All others are provided access to restricted technology only with appropriate U.S. government authorization.

INSTRUCTIONS

1. Review and complete either section 1 or 2 (as appropriate), sign, and date. You are required to furnish **unexpired, original** documents, except where noted.
2. If you are an external partner or employee of a Northrop Grumman affiliate not incorporated in the U.S., you are also required to complete section 3.
3. A company Human Resources or Security representative, or designee, inspects the documents, verifies the accuracy of the information provided below, and certifies.

SECTION 1 – For U.S. persons ☐ CHECK IF THIS SECTION APPLIES TO YOU

LEGAL NAME		SIGNATURE		DATE
COUNTRY OF CITIZENSHIP			COUNTRY OF RESIDENCE	
DUAL CITIZENSHIP? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, LIST ALL OTHER COUNTRIES: _____				
U.S. CITIZENS			NON U.S. CITIZENS	
<input type="checkbox"/> Unexpired United States passport or passport card <input type="checkbox"/> Certificate of United States citizenship (USCIS Form N-560 or N-561) <input type="checkbox"/> Certificate of naturalization (USCIS Form N-550 or N-570) <input type="checkbox"/> Certificate of birth abroad issued by the U.S. Department of State (Form FS-545 or DS-1350) or Report of Birth Abroad (FS-240) <input type="checkbox"/> Original or certified copy of a birth certificate issued by a state, county, municipal authority, or outlying possession of the United States, bearing an official seal <input type="checkbox"/> U.S. citizenship status confirmed in JPAS. <u>Note:</u> This option may ONLY be used by U.S. government security or human resources representatives in verifying the citizenship of U.S. government employees, and is not for use by or for contractor personnel.			<input type="checkbox"/> Unexpired temporary resident card (USCIS Form 1-688, not 1-688A or 1-688B) <input type="checkbox"/> Unexpired re-entry permit (USCIS Form I-327) <input type="checkbox"/> Unexpired refugee travel document (USCIS Form I-571) <input type="checkbox"/> Alien registration receipt card with photograph (USCIS Form I-551 or I-151) <input type="checkbox"/> Unexpired foreign passport with I-551 stamp	



C638 1X2

**NORTHROP GRUMMAN PRIVATE/PROPRIETARY LEVEL I
(WHEN COMPLETED)**

EXPORT CONTROL STATUS VERIFICATION

Form C-638 (9-10)* Page 2 of 2

NORTHROP GRUMMAN HUMAN RESOURCES USE ONLY																							
SUBMISSION DATE (MM/DD/YYYY)								MYID NO.								CASE NO.							

LEGAL NAME FROM SECTION 1 (IF APPLICABLE)

SECTION 2 – For non-U.S. persons ☐ CHECK IF THIS SECTION APPLIES TO YOU

LEGAL NAME	SIGNATURE	DATE
COUNTRY OF CITIZENSHIP	COUNTRY OF BIRTH	
DUAL CITIZENSHIP? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, LIST ALL OTHER COUNTRIES:		
<input type="checkbox"/> Unexpired foreign passport (with I-94 if available)		EXPIRATION DATE
<input type="checkbox"/> Other Non-U.S. document establishing country of citizenship*		EXPIRATION DATE
*SPECIFY TYPE OF DOCUMENT		

SECTION 3 – For any of the following:

- Employees of Northrop Grumman affiliates not incorporated in the U.S.
- External partners
- Contractors
- Contract labor
- Consultants

☐ CHECK IF ANY OF THESE OPTIONS APPLY TO YOU

LEGAL NAME OF EMPLOYER (COMPANY/AGENCY)
IS YOUR DIRECT COMPANY/AGENCY EMPLOYER (NOT PARENT OR SUBSIDIARY) INCORPORATED/ ORGANIZED TO DO BUSINESS IN THE U.S. <input type="checkbox"/> YES <input type="checkbox"/> NO
IF NO, WHERE
IF YES, ARE YOU CURRENTLY REPRESENTING ANY OTHER COMPANY/AGENCY <input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, OTHER COMPANY/AGENCY REPRESENTED (LIST ALL)
PLACE OF INCORPORATION/ORGANIZATION OF EACH SUCH COMPANY/AGENCY REPRESENTED

CERTIFICATION - To be completed by company Human Resources or Security representative, or designee

I certify that this form has been completed in accordance with the instructions and is true and correct to best of my knowledge and belief.		
LEGAL NAME	SIGNATURE	DATE
TITLE		MY ID NO. (IF APPLICABLE)



C638 2X2

APPLICANT DRUG TESTING

Form C-378 (11-11)*

NORTHROP GRUMMAN

In the interest of the health and safety of all employees and to safeguard the legitimate interests of Northrop Grumman Corporation, all applicants who receive job offers are required to undergo a test to detect the use of certain specified drugs. Accordingly, all applicants who receive job offers are required to provide a specimen of urine, blood, or breath, upon demand to the Northrop Grumman Medical Department or its designee.

Failure or refusal to be tested, falsification of a specimen, or a positive test result terminates any further employment processing. You will be informed by the Human Resources Department if you fail to meet Northrop Grumman medical standards, with respect to these tests. Should you desire further information, you may call the Medical Department, or its designee.

CONSENT FOR DRUG TESTING

The undersigned hereby consents and agrees to give a sample of urine, blood, or breath for drug testing as a part of the employment process. I understand that these samples will be tested by _____ Laboratory, which will inform Northrop Grumman's Medical Department of the results of the testing. I further understand that Northrop Grumman's Medical Department, or its designee, will inform Northrop Grumman's Human Resources Department and appropriate management whether or not I have met the Northrop Grumman medical standards, with respect to these tests.

My signature below indicates that: (1) I have read and understand this form; (2) I am freely consenting to this drug screening procedure; and (3) any specimens provided will be my own and will not be adulterated.

ELECTRONIC SIGNATURE STATEMENT: I hereby certify that by entering my name, either hard copy signature or electronically typed, I hereby acknowledge that I am certifying and that I agree with the terms of the terms set forth herein, and I also intend for this document, if utilized in electronic form, to have the same force and effect as if it was personally signed by me in writing.

APPLICANT'S PRINTED NAME	SIGNATURE	DATE
--------------------------	-----------	------

APPLICANTS UNDER AGE 18 HAVE PARENT/GUARDIAN COMPLETE CONSENT AND AUTHORIZATION BELOW

I understand the above conditions, and I hereby consent to and authorize Northrop Grumman to conduct a pre-employment drug/alcohol test on my minor child or dependent, as a condition of their employment. In the event of a positive drug test, the results will be provided to my minor child/dependent, and to me upon my written request.

PARENT/GUARDIAN PRINTED NAME	SIGNATURE		DATE
ADDRESS	CITY	STATE	ZIP CODE
TELEPHONE NO.			



POST-OFFER MEDICAL QUESTIONNAIRE

Form C-562 (3-11)* Page 1 of 2

GENERAL INFORMATION						DATE
NAME						SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
ADDRESS		CITY		STATE	ZIP CODE	TELEPHONE NO.
POSITION APPLIED FOR						
COMPANY ELEMENT RECRUITER NAME		EXT.	ORGN.	START DATE	WORK EXT.	EMPLOYEE NO.
<input type="checkbox"/> NEW HIRE <input type="checkbox"/> REHIRE		IF A REHIRE:		TERMINATION DATE	FACILITY	

APPLICANT TO COMPLETE

The following questions assist the company in determining whether you can safely and effectively, with or without a reasonable accommodation, perform the job for which you have applied. The answers to these questions will be treated by the company as confidential.

DO YOU HAVE ANY PHYSICAL OR MENTAL CONDITION WHICH WOULD AFFECT YOUR PERFORMANCE OF THE JOB TASKS OF THE POSITION FOR WHICH YOU HAVE APPLIED, PLEASE DESCRIBE BELOW. IF YOU ARE UNSURE OF THE JOB TASKS, PLEASE ASK FOR CLARIFICATION. SEE PG. 2 FOR ADDITIONAL INFORMATION

ARE YOU REQUESTING AN ACCOMMODATION FOR ANY CONDITION LISTED ABOVE TO ASSIST YOU IN PERFORMING THE JOB FUNCTIONS OF THE POSITION FOR WHICH YOU HAVE APPLIED

☐ YES ☐ NO

IF THE ANSWER TO THE ABOVE QUESTION IS YES, PLEASE SUGGEST ANY PROCESSES, PROCEDURES, EQUIPMENT, OR DEVICES YOU BELIEVE MAY BE REASONABLE AND NECESSARY ACCOMMODATIONS

The following information may assist responding personnel in the event of an emergency. **Responses to this section are voluntary.**

PLEASE LIST THE NAMES AND ADDRESSES OF MEDICAL PROVIDERS WHOM YOU WOULD PERMIT THE COMPANY TO CONTACT TO DISCUSS YOUR MEDICAL CONDITION

PLEASE LIST BELOW ANY MEDICAL CONDITIONS YOU HAVE, MEDICATIONS YOU USE, ALLERGIES YOU HAVE, OR ANY OTHER INFORMATION THAT MIGHT ASSIST MEDICAL OR EMERGENCY PERSONNEL IN TREATING YOU

POST-OFFER MEDICAL QUESTIONNAIRE

Form C-562 (3-11)* Page 2 of 2

ACKNOWLEDGEMENT

I understand that the company may require me to answer additional health-related questions or undergo a further medical examination, at company expense, before any final hiring decision is made. I also understand that a drug screen, at company expense, is required before any final hiring decision is made.

I understand that prior to my drug test that I may confidentially discuss any prescription medications that I take with the Northrop Grumman medical doctor or designate.

I understand that I remain a job applicant until my employment start date. I further understand that my conditional offer of employment may be withdrawn at any time for any lawful reason. I certify that all the answers and written explanations given on this form are true, complete, and correct, to the best of my knowledge, and I understand that any misstatement, concealment, or omission of fact is cause for withdrawal of my conditional offer, or if discovered after employment begins, cause for immediate dismissal from employment.

APPLICANT SIGNATURE

DATE

Note: The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. In order to comply with this law, we are asking that you **not** provide any genetic information when responding to this request for medical information. "Genetic information," as defined by GINA, includes an individual's family medical history, the results of an individual's or family member's genetic tests, the fact that an individual or an individual's family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual's family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.