



## Visiting Faculty Application Form

Please complete this form (both pages) and send it to the Department/School you are visiting for approval. A scanned copy via email is acceptable.

<b>1. YOUR PERSONAL INFORMATION</b>			
FIRST NAME:		LAST NAME:	
CITIZENSHIP:		DATE OF BIRTH:	
HOME INSTITUTION:			
POSITION/RANK:			
MAILING ADDRESS:			
PHONE:		EMAIL:	
<b>2. YOUR RESEARCH BACKGROUND</b>			
2-a) Please provide a brief description (in non-technical terms) of your areas of research interest and expertise.			
2-b) Please attach an updated Curriculum Vitae to this application. YES <input type="checkbox"/> NO <input type="checkbox"/>			
<b>3. YOUR VISIT TO THE UNIVERSITY OF BRITISH COLUMBIA (UBC), FACULTY OF EDUCATION</b>			
3-a) Why do you want to visit the UBC Faculty of Education?			
3-b) Is there a faculty member in the UBC Faculty of Education who will host your visit? If yes, please provide his/her name and the Department/School he/she belongs to. If not, please visit our website at <a href="https://www.directory.ubc.ca/index.cfm">https://www.directory.ubc.ca/index.cfm</a> for a full directory of our faculty members and link with those who have similar research interests and who might be able to serve as your host.			

3-c) How long do you plan to visit UBC and what are the tentative dates?	
3-d) What do you plan to do during your visit?	
3-f) What resources will you require while visiting UBC ( <i>e.g., shared office space, internet connection, library access</i> )? Please note that we will not be able to provide equipment and other supplies ( <i>e.g., laptops</i> ).	
3-g) Visiting faculty members are usually expected to give a lecture or host a seminar during the visit. Please provide a title and abstract of a lecture/seminar that you are willing to provide.	
<b>4. SIGNATURES</b>	
Applicant's Signature:	Date of Application:
Hosting Faculty Member's Signature:	Date of Agreement:
Department Head/School Director Signature:	Date of Approval: