Berkeley Campus Shared Services

Visiting Scholars and Visiting Student Researchers Form

Request must inclu	ıde: ∐App	ot. Lett	.er l	_VSPA Le	etter	□De	an's A	Approva	ıl □Job Des	sc. ⊔PEM L	」Other:			
APPOINTMENT INFORMATION														
Appointment Type: Start Date: End Date:														
Name (First Las		Sponsor:												
Email: Sponsor Email:														
Highest Degree:				Institution:						Conferral Date:				
Home Country: Current Position:														
Visa Type:	Visa Status:							☐ Dependents ☐ Visa Not Required						
English Compet	Spo	Sponsor Letter English Profi						ency Test						
Stipend, fellowship or PI supplement? (Glacier needed) Y Department Name														
LOCATION														
RESEARCH DUTIES														
NOTES														
NOTES														
								EEC						
FEES														
Fees Visa Application (\$500)		Paid	Paid by Host Pa			id by Scholar		N/A	<u>If Fee is paid by nost</u> , provide the chartstring(s) in the next					
			$\vdash \vdash$	section. If the scholar is reimbursing host, direct scholar to send a check/money order payable to the UC Regents to:										
University Services Fee Shipping/FedEx		+	$\vdash \vdash$	Name: Email:										
Medical Insurance		+	\vdash		+ + -		-	┼	Address:					
Department Fee			\vdash		+			\vdash	Address.					
FUNDING INFORMATION														
Expense	_	ency					Dept Program Chartfield 1			Chartfield 2	Percentage FTE			
Visa	\$500	Ту	pe				- 0/	-1	.0					
Univ. Svcs. Fee	\$500		-											
Shipping/FedEx	\$40													
Department	\$		-											
PI Supplement*	\$													
Chartstring for V	isa Fees:							Fed-	Ex Speed Typ	e:	1			
					CO	NTA	CT II	NFOR	MATION					
Preparer	Nan	ie:							Email Ac	ldress:				
					AF	PRC	VAL	S (as	needed)					
			Attac	h email	appr	oval	if nee	eded i	n lieu of sig	nature below				
Faculty Sponso	Signature:													
Funding	~				Signature:									
Department	Name:			Signature:										
Dean	Name	Signature:												