



University of California, Los Angeles VISITING SCHOLAR APPOINTMENT FORM

Please complete the information requested below and attach a copy of the nominated Visitor's Curriculum Vitae. Obtain the Chair and Dean's signature. Mail a copy to Academic Personnel, 3109 Murphy Hall, 140701.

1. SCHOLAR INFORMATION

Last, First Name, M.I. q Male q Female	_____	University ID #	_____
Street Address	_____	Date of Birth	_____ (MM/DD/YYYY)
City/State/Zip Code	_____	E-mail	_____
Phone Number	() _____	Graduate Degree	_____
U.S. Citizen?	q Yes q No	Date Received	_____ (MM/YYYY)
U.S. Resident Alien	q Yes q No	Degree Institution	_____
Country of Citizenship	_____	Country	_____

Period of Appointment, from _____ to _____ Visitors are appointed for short periods not to exceed 12 months, and more typically for six (6) months or less. See The UCLA CALL, Appendix 39, Section IV, Term of Appointment.

- Check if this is a Re-appointment.
- There is proof of support from external sources and of health insurance sufficient for duration of appointment.
- An Export Control Compliance Attestation, signed by the appropriate Coordinator has been reviewed if the proposed Visitor is neither a U.S. Citizen nor U.S. Resident Alien.

2. JUSTIFICATION

Please indicate the academic purpose served, proposed activities while at UCLA, and qualifications of the proposed Visitor. See The UCLA CALL, Appendix 39, Section III, Criteria for Appointment. Attach additional sheet if needed.

3. CONTACT INFORMATION

Contact Name	_____	Phone	_____
Department or Unit	_____	E-mail	_____

4. APPROVALS

Chair's Signature	_____	Date	_____
Dean's Signature	_____	Date	_____

ACADEMIC PERSONNEL OFFICE ACTION