

Request for Visiting Scholar/Visiting Undergrad Student/Post-Doc

Hosting Faculty to Complete 1-7

Date: \_\_\_\_\_

1	<div>Surname/Family Name (Last Name):</div> <div>Title (Dr., Mr., Mrs.):</div> <div>Given name(s) (First &amp; Middle Names):</div> <div>Gender:</div> <div>Email Address:</div> <div>Date of Birth (mm/dd/yyyy):</div> <div>Does Visitor have a college degree? If so, which one (Bachelors, Masters, Ph.D.)?</div> <div>Home Institution name and address:</div> <div>Is there a contract or MOU between Purdue and this potential Visiting Scholar's home institution?</div> <div>Yes</div> <div>No</div> <div>If so, please email it to Misty Clugh. It is required per general counsel</div>
2	<div>Hosting Faculty Name:</div> <div>Hosting Faculty Office Phone:</div> <div>Hosting Faculty Job Title:</div> <div>Hosting Department:</div> <div>Hosting Faculty Email:</div>
3	<div>Duration of Visit: Start Date (mm/dd/yyyy):</div> <div>End Date (mm/dd/yyyy):</div> <div>Type of Appointment:</div> <div>Visiting Scholar</div> <div>Visiting Undergrad</div> <div>Post-Doc</div> <div>Other _____</div>
4	<div>Not Funded by Purdue - Insert Funding Party (if known): _____</div> <div>Is a US government agency providing funding to Purdue specifically to support this international scholar's visit to Purdue?</div> <div>Yes, agency name: _____ (attach award letter)</div> <div>No</div> <div>Purdue Funded - Mo. Salary/Mo. Living Allowance (provide account info below): \$_____</div> <div>One Time Reimbursement (provide account info below): \$_____</div> <div>Account number:</div>
5	<div>International Fees:</div> <div>ISS Fees (federal funds may not be used) (Required to be paid by Purdue account) :</div> <div>Account number:</div> <div>Express Mail Paid By (J-1's only):</div> <div>Department (provide account below)</div> <div>Visitor</div> <div>Account number:</div>
6	<div>Provide a <u>brief description</u> of what candidate will be doing while at Purdue. Please include the title of research project(s) and any proposal writing (to be completed by hosting professor). This will be added to the offer/invitation letter.</div> <div>As hosting professor, I agree with the above information and will see that the above named visitor checks in/out with the school/department liaison.</div> <div>Signature (Faculty Host):</div>

7	<p>Discuss proposed office space and other resource needs (hosting professor). Any site of activity outside a Purdue University campus will need paperwork supporting that worksite (i.e., contractual agreement).</p> <p>Site of program activity (address including building name):</p> <p>COVID-19 preparations:</p> <table border="0"> <tr> <td>Will scholar be accessing, assigned to, or intermittently working from, a laboratory?</td> <td>Yes</td> <td>No</td> </tr> <tr> <td colspan="3">If yes, please email the lab's SOP as documentation to Misty to upload.</td> </tr> <tr> <td>Have you (hosting professor) or the PI completed the COVID-19 Safe Practices training?</td> <td>Yes</td> <td>No</td> </tr> <tr> <td colspan="3">If yes, please email the confirmation as documentation to Misty to upload.</td> </tr> </table> <p>Individuals coming to Purdue's campus from outside the USA must adhere to Protect Purdue guidelines and U.S. entry requirements. Please provide the following information as part of the "Self-Quarantine Plan" for the scholar.</p> <p>How will the visitor obtain and furnish a residence?</p> <p>If they become exposed to COVID and need to quarantine, how will the visitor obtain food and supplies? Will the visitor understand how to order groceries online? Will someone deliver food and supplies to the visitor?</p> <p>Will the visitor have acceptable bank, credit card or other resources to pay online? Will they be able to navigate the online or smart-phone based apps required for conducting personal business if they become exposed to COVID and need to quarantine?</p> <p>How will the PI manage any health or other emergency situations experienced by the scholar or their family?</p>	Will scholar be accessing, assigned to, or intermittently working from, a laboratory?	Yes	No	If yes, please email the lab's SOP as documentation to Misty to upload.			Have you (hosting professor) or the PI completed the COVID-19 Safe Practices training?	Yes	No	If yes, please email the confirmation as documentation to Misty to upload.		
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8	<p>Business Manager name, email address, and phone:</p> <p>Signature (Business Office):</p>												
9	<p>Department Head name, email address, and phone:</p> <p>Signature (Department Head):</p>												