APPENDIX 1

**Standard University Visitor Application Form**

To be completed by the Strathclyde staff member who will directly supervise the visitor and submitted to the Head of Department/School for approval and onward submission to the Faculty Office or Human Resources as appropriate (see below). This form should not be used for honorary appointments.

Submission of form

* This form should be submitted to the **Faculty Office where the University will make no payment** **to the visitor and there is no requirement for sponsorship under a Temporary Work – Government Authorised Exchange (GAE) Visa**.
* This form should be submitted to **Human Resources if the visitor is to receive payment from the University and/or sponsorship under a Temporary Work – GAE Visa applies**.

Accompanying documentation

* In all cases an up-to-date copy of the visitor’s CV should be attached.
* Where a payment will be made and/or sponsorship under Temporary Work - GAE Visa applies, a copy of the visitor’s passport photo ID page, educational qualifications (translated if not in English) and a letter from the sponsoring organisation confirming the sponsorship terms must also be submitted to Human Resources.

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| --- | --- | --- |
| Supervisor’s name |  | |
| Department/School or Unit |  | |
| Visitor type  *e.g. (Sponsored) Visiting Researcher/Scholar, Academic Visitor* |  | |
| Visitor’s name |  | |
| Visitor’s home address |  | |
| Visitor’s date of birth |  | |
| Visitor’s work address |  | |
| Visitor’s position in home institution (if applicable) |  | |
| Dates of visit (date from/to) |  | |
| New request or extension |  | |
| Period of previous visit (if applicable) |  | |
| Duties during the visit |  | |
| Will the visitor work in a laboratory? | Choose an item - *If yes, evidence of proficiency in English language to level B1 of the Common European Framework of Reference for Languages (CEFR) must be provided before the visitor starts working in the laboratory.* | |
| Payment/expenses arrangements  *(please tick appropriate box which applies)* | 🞐 1. Visitor will receive no payment/expenses from the University  🞐 2. Visitor will receive funding directly from an external source (funding confirmation letter must be attached)  🞐 3. Visitor will receive payment from the University (details below) | |
| For Sponsored Visiting Researchers receiving funding, this must meet at least the [National Minimum Wage](https://www.gov.uk/national-minimum-wage-rates)  Level of funding per month: ……………….. directly by funder / by the University *(delete as appropriate)*  If funded by University Account, please provide details: ………………………………………………………………….…..  Note that, *with the exception to Sponsored Visiting Researchers, any payments made will be a reasonable contribution to travel and/or subsistence expenses only and should not be regarded as payment for work undertaken).* | | |
| Will the visitor contribute to a project that could generate new IPR? | Choose an item - *If yes, a Confidentiality Agreement will be required – please see guidance notes.* | |
| Is a bench fee to be charged? | Choose an item *- If yes, please specify the amount that will be charged……..………………………………………………………..* | |
| **Academic Technology Approval Scheme (ATAS)** (if applicable)  Some visitors may require an ATAS certificate before coming to the UK (exemptions apply for some nationals). Please confirm below if this is required using the guidance [here](https://www.gov.uk/guidance/find-out-if-you-require-an-atas-certificate).   * A researcher who is working independently or as part of a team and is conducting research at PhD level or above. * A student, or someone who is currently studying overseas, at PhD level. | | *ATAS REQUIRED?*  Choose an item  Choose an item |
| **ATAS - Code and Statement (where required)**  If an ATAS Certificate is required, please complete the information below, and send this to your visitor to allow him/her to make an application for the certificate as soon as possible  CAH3 Code ……………………………………  ATAS Research Statement *(where required)* | | |
|  | |  |
| Approved by Head of Department/School  Name………………………………………………………………………………...Date………………………………………… | | |
| Approved by Dean (for appointment requests exceeding 12 months)  Name………………………………………………………………………………...Date………………………………………… | | |