



Office use only:

V3.2

Category

CORE ID#

VISITORS TO THE DEPARTMENT Mathematical Institute, University of Oxford

Once completed, this form should be returned to the visitors co-ordinator <visitors-coordinator@maths.ox.ac.uk>

Incomplete forms will be returned to the host and may result in delays

Please submit this form a minimum of 2 weeks before the visitor's arrival

PART A – Personal Details (to be completed by the applicant)

Last name

Title

First name(s)

E-mail

Contact Telephone

Correspondence address

Home institution or organisation

Current position

Nationality

Country of residence

Does the applicant require a visa for the purpose of this visit to Oxford?

Yes

No

Proposed visit (to be completed by the host)

What visitor status are you applying for? *(Please select one option only)*

Academic Visitor (Less than 3 months)

Academic Visitor (More than 3 months)

Visiting lecturer

Visiting Student

Research Fellow *(if externally-funded fellowship is held)*

Affiliate (Faculty/Researcher)

Please see <https://www.maths.ox.ac.uk/members/policies/visitors> for visitor category definitions and criteria

Note: Students visiting for one term or longer will be classed as a recognised student.

Comments

Part B – Visit details to be completed by the host

Date of proposed visit

From:

DD	MM	YYYY

To:

DD	MM	YYYY

Please provide a brief description of what the visitor intends to do whilst visiting the department and details of any collaborative work they may undertake including names of the collaborative host/partner or research group. Please append further details at the top of page 4 if necessary.

Will the visitor hold a fellowship or other funding while at the Mathematical Institute Yes No
If you answered yes to the above, please provide details below:

Visitors staying longer than one month may be required to pay a bench fee.

If applicable, has a bench fee been discussed with the Head of Research Facilitation? Yes No

Amount agreed £

Invoice details:

Per month Per visit

Signature of host

Print name

Signature of Head of Research Group

Print name

Research Group

Part C – For all academic visitors OVER 3 months and ALL visiting students (to be completed by the host)

Please tick to confirm that the following attachments have been submitted with this visitor application form

- A supporting statement from the academic sponsor/host
- A supporting statement from the research group head
- Applicant's CV

For Visiting Lecturers

- A supporting statement from the academic sponsor/host
- Applicant's CV

For Affiliates and Externally Funded Research Fellows

- Applicant's CV

Part D – To be completed by the host or local administrative staff

What type of visa does the visitor require to allow them to undertake the activities described within their application? *(Please select one option only)*

- Business visitor visa Tier 5 Other
- Academic visitor visa PPE
- Tier 4 No visa required

If you answered 'other', please provide details below:

For advice on visas, please see <https://www.gov.uk/government/organisations/uk-visas-and-immigration/>

- Has the visa already been obtained? Yes No Not applicable
- Has a scanned copy of the visa been sent in advance? Requested Received Not applicable

- Is the MI Research Project/Centre paying for: An Honorarium Travel
- If so, please include an expense claim form in the visitor welcome pack.* Subsistence Other

If you answered 'other', please provide details below: *(e.g. Accommodation)*

Please provide a budget code:

- Please indicate if any of the following resources will be required.
- | | |
|--|--|
| <input type="checkbox"/> Office space in AWB | <input type="checkbox"/> Access to Whitehead Library |
| <input type="checkbox"/> University card* | <input type="checkbox"/> MI Computer Account |
| <input type="checkbox"/> Visitors card* | |

** For visits for less than 2 weeks, a temporary visitor card will be issued. Oxford University students already issued with a University Card will be granted building access using their existing card.*

Additional comments:

Continuation of comments from part B:

Approvals required for all Visitors (*office use only*)

Academic visitors with duration of LESS THAN 3 months

Approved by HoD:

Date:

Academic visitors with duration of MORE THAN 3 months

Approved by Exec:

Date:

MI Visiting Research Fellows/Alan Tayler Visiting Research Fellows/Alan Tayler Visiting Lecturers/Visiting Professors

Approved by
Dept. Committee:

Date:

Affiliate Faculty/Affiliate Researcher/Externally Funded Research Fellow

Approved by HoD:

Date:

Additional Notes:

Visitor's information logged:

Approvals confirmed:

Details passed to finance (if applicable):

Visitors CoA form received:

Copy of visitor's passport/visa obtained (if applicable):

VISITOR CO-ORDINATOR USE ONLY

Date: