DIVISION OF ENGINEERING AND APPLIED SCIENCE Recommendation for Appointment <u>Visiting Professor</u>

Visiting Professors (of different ranks, Assistant, Associate, Full) must hold professorial rank or its equivalent at their home institution and must teach at least once course while in residence at the Institute. Appointment is full-time with stipend, for a minimum of one full quarter; visiting professors are members of the faculty.

				ı	Optio	n Info	rmatio	n				
Faculty sponso				Dep Opti								
Prepared by:]	Ext.			
Please list the	Calte	ech mail	code a	nd off	ice assi	gnment	for visi	tor:		·		
Mail Code:						:]	Ext.:	
Candidate Information												
Full name:												
Address:												
Phone:					Email:							
Birthdate:					of birth country							
Citizenship:						Mar	ital statu	1S:				
Visa status (for nonresident aliens		Туре	vica.				Ex	710				
currently in the U.S.)		Турс	v isa.					ate:				
If family mem		will acco	mpany	NON:	RESIDE	ENT AL	IEN, pro	ovide	the foll	owing in	forma	ation for each
Name Relati		onship Birthdat			Birthplace (city, state, country)					Citiz	zenship	

			Ca	ndida	ate's Per	manent Positior	1				
Employe	::										
Title:								Hire date:			
the outsic funded p	le su eriod	pporting age	ency. A lett NCLUDED	er from	n the prov this form.	ling, declare amo vider of funding, i Proof of support	indica	ating the amount	and the		
US\$:			Agency:								
				Prof	essional	Experience					
					Academi	c record					
Degree M			ajor		Year Granted		School				
					Position	ns Held					
	Appointment Information										
Period of appointment (how many months):					Proposed effective date:						
NOTE: Recommendations must be submitted to the Division Office at least one week before the Faculty Records Office submission deadline of 4 weeks for U.S. citizens/perm. residents and 8 weeks for nonresident aliens											
Caltech sa	alary	amount:									

Budgets to b	e charged:			Alias #	Doveontogo				
PIA	#			Alias #	Percentage				
agency, indi	fessors are eligible for h cate who will pay for h ch account (provide PTA	ealth insuranc			3				
Health insur	rance will be paid by:								
	* 7	•							
Special All	owances								
Are you providing for relocation, housing, or per diem expenses? If yes, list the maximum \$ amount and the POETA here:									
Amount:			PTA#						
Dlaggaranasi	-			search to be Co					
taught:	de a brief description o	r candidate s q	uaiincatio	ns, research to be	conducted, and class to be				
Division Approval Process									
Foculty on on	20040				Date				
Faculty spor signature	1501 5				Date				

Submit forms to Maria Cervantes by email maria.cervantes@caltech.edu

9/27/23