

**Application for Visiting Scholars (Research Associates)**  
**Department of Educational Policy and Administration**

**Personal Information**

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

Fax # \_\_\_\_\_

E-mail address \_\_\_\_\_

**Information to be Used if Accepted**

Contact Person in Home Country/City for Emergencies

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

Fax # \_\_\_\_\_

E-mail address \_\_\_\_\_

If you are invited to the Department as a visitor, do you intend to bring other family members? If so, what are the relationships and ages of any children? (Note: This information is not relevant for selection but must be used in planning for visitor if accepted)

**Academic Background/Interests (please attach vita)**

Institution of earned Ph.D./equivalent \_\_\_\_\_ Date \_\_\_\_\_

Location of Institution \_\_\_\_\_ Major \_\_\_\_\_

Current Institutional/Organizational Affiliation

Name and Address of Institution/Organization \_\_\_\_\_

Current Position in Institution/Organization \_\_\_\_\_

## Nature of Proposed Visit

1. What dates do you intend to be with the Department of Educational Policy and Administration as a visitor?

\_\_\_\_\_ through \_\_\_\_\_  
(month/day/year) (month/day/year)

Note: Application deadlines are as follows:

November 1: For an arrival between the months of August through December the following year.

April 1: For an arrival between the months of January through July the following year.

2. Please describe your general goals for the period you intend to visit the University (please respond on separate sheet).

3. What do you think you would find at the University of Minnesota that would meet your needs better than at another institution (please respond on separate sheet)?

4. Proposed Activity to Meet the Above Goals (check all that apply):

- Conduct research on own project (topic of project \_\_\_\_\_)
- Conduct research with department faculty member in area of \_\_\_\_\_
- Utilize library resources
- Audit classes
- Other (please respond on separate sheet)

## Department Faculty Associate

5. To be accepted as a visitor, a member of the department faculty must agree to serve as a department faculty associate. Have you identified a faculty member in the department who seems to be a good match for the area of your interest and who might serve as a faculty associate?

No, I am asking the department to identify a potential faculty associate.

Yes, but I have not contacted him/her (please identify \_\_\_\_\_)  
If yes, how did you become familiar with the work of this faculty member?

Yes, and I have talked to him/her about the possibility (please identify \_\_\_\_\_)  
If yes, what are the current understandings/proposed plans?

**I have read and agree to the above guidelines, privileges and limitations of the visit. I understand that if accepted, as indicated in a letter of invitation, I will assume responsibility for completing the necessary visa paperwork, etc. through University International and Student Scholar Services <http://www.international.umn.edu> and <<http://www.iss.umn.edu>>.**

Signature \_\_\_\_\_

Date \_\_\_\_\_