



Visiting Scholar/Researcher Approval and Screening Form

*This form must be completed each time a Visitor visits, even if the Visitor has previously visited.

Name of Host: _____
Name of Host Unit: _____

SECTION A: To Be Completed by the Host (in collaboration with the visitor)

Visitor Information

Full Name of Visitor: _____
Date of Birth: _____
Country of Citizenship: _____
Country of Residence: _____

Academics Degrees

Degree	Date Awarded	Institution Granting Degree, City and Country

Home Employer(s)/Institution(s)

List the visitor's current institutional or employer or, if he or she is not currently employed, list his or her most recent prior employer and (if applicable) the employer obligated to hire him or her upon your return. Please also submit a current CV with his or her educational and employment history.

Employer's Name & Address:	Employment Dates:
Supervisor's Name & Title:	Supervisor's Email & Telephone Number:

Description of Proposed Activity During Visit:

List any expected outcome(s) of the visit (techniques learned, publication, final report, etc.):

Will any special equipment or items (e.g., chemicals, lasers, laboratory animals, biological agents, human subjects) be needed for the research/scholarship?

Yes No

If yes, explain in greater detail below and note if Host does not control the special equipment or items:

*Note: use of such equipment or items is not guaranteed and may require additional training and/or approvals.

Will Visitor bring any intellectual property or any proprietary or confidential information/data for use in the research/scholarship?

Yes No

If yes, describe the intellectual property or the information/data and who or what entity owns or controls it.



Home Sponsor(s)

Fill in the columns with information relating to all institutions of higher education, governmental entities or private entities that are funding expenses relating to his or her research/scholarship:

Name of Sponsor Address (City, State, Country)	Describe support (Amount, purpose)	Nature of sponsor (i.e. university, governmental, NGO, private, etc.)

Please attach the documents below with this completed form:

Curriculum Vitae (required)

Other:

Copy of passport (required for non-U.S. persons)

Authorization of Criminal Background Check (required)

Signature

I certify that the above information is correct, and I authorize the verification of all information provided on this form. I also understand that my inclusion of incomplete or inaccurate information in the form may result in a delay of the approval processes as well as revocation of the invitation.

Signature of Proposed Visitor: _____

Date: _____

SECTION B: To be Completed by Host Unit (e.g., Department, Center)

Explain in detail any way that this visit or visitor is unique. For example, as UTEP does not typically pay Visiting Scholars or Researchers, explain if there are any plans to pay this visitor (including travel reimbursement).

Yes No **Will or could information or items subject to U.S. Export Control Laws be shared with proposed Visitor in the course of his/her research/scholarship?**

If yes, please explain in greater detail:

Yes No **Has a Criminal Background Check been conducted?**

If CBC concerns were reported, please describe:

Yes No **Is the research/scholarship related to a Sponsored Program at UTEP or elsewhere?**

If yes, provide Project Title, Name of Sponsor, Name of Principal Investigator, Account Number (if held by UTEPZ), and role the visitor has or would have on the project:

Yes No **Does the researcher/scholarship include or involve the use of any existing UTEP intellectual property or proprietary or confidential information/data of UTEP?**

If yes, list the intellectual property or proprietary or confidential information/data below and who at UTEP uses/controls it.



Initial Approvals

The following must indicate approval before further processing of a proposed Visit/Visitor.

Signature of Host (e.g., Department, Chair, Center Director):	Date:
Signature of Supervisor of Host Facility/Lab:	Date:

Signature of Vice President for Research (or designee)

I confirm that the appropriate screenings and pre-authorizations have been completed. The Host Unit is welcome to visit the Visitor if requirements described on this form, if any, are met.

Signature: _____ Date: _____

Completed forms will be returned to the Host Unit and maintained according to the UTEP records retention schedule. If the Visitor is a non-U.S. person, a copy will be sent to the Office of International Programs and Study Abroad.