### **Incoming Visiting Scholar Request Form**

# Office of Academic Affairs and the International Student and Scholar Services (ISSS) **Central Connecticut State University**

Due on or before: February 1 for Fall Semester July 1 for Spring Semester

### Instructions

This form must be completed by CCSU faculty who seek approval to host a faculty member on exchange from a CCSU partner school or a visiting scholar from any overseas university for a semester or the full academic year. If the request involves a bilateral exchange with a CCSU partner university, this Incoming Exchange Faculty/Visiting Scholar Request form should be filed in conjunction with the Outgoing CCSU Faculty Exchange Request Form (available on the ISSS website). The ISSS website also offers the most recent listing of formally affiliated institutions.

Before completing this form, the faculty member who is hosting the scholar should discuss the plan 1) with the International Student and Scholar Services to obtain general advice and a copy of the Administrative Procedures sheet, and 2) with the Department Chair to review issues relating to teaching, student/community engagement, general responsibilities, and the resources that the department will provide for the scholar (e. g., housing, office space, salary, computing equipment, etc.).

Visiting Scholar? ☐ Yes ☐ No

Type of Scholar		
This form is being submitted to (check one):		
☐ Invite an Exchange Professor from a CCSU Pa	artner school (the Outgoing CCSU F	faculty Exchange Request Form must also be approved)
☐ Invite a Visiting Scholar from another overseas	s institution to CCSU	
CCSU Faculty Sponsor/Primary Host of Propo	osed Scholar	
Name:	Academic Departmen	ıt:
Telephone numbers: office:	home:	cell:
Will you be on leave during some or all of the scho	olar's stay at CCSU? □ Yes	□ No
If yes, who is the Alternate Host of the Incoming	Visiting Scholar:	
Dates of proposed visit to CCSU:		
Note: The host must notify all appropriate offices (ISSS, campus unaccompanied or unannounced.	Chair, and Department Secretary) of a	the scholar's arrival date. <u>The scholar should not arrive on</u>
What CCSU course(s) will the Visiting Scholar tead	ch during the proposed period?	

Required: What housing arrangements will be made for the Visiting Scholar by the host department?

Required: What arrangements will be made to meet the Visiting Scholar on arrival in Connecticut and transport him/her to the place of residence?

Has the host academic department agreed to provide office space, secretarial support, and telephone and computer access to the

If No, please explain alternate arrangements.

# Visiting Scholar Information

-	Once this application is approved, a background check will be re ). To facilitate that process, and to provide visa-related informat, lar's Curriculum Vitae.		, -			
Full Legal Name of t	the Visiting Scholar:					
Visiting Scholar's e-r	mail address:		_			
Home institution of	the Visiting Scholar:					
Visiting Scholar's aca	iting Scholar's academic discipline:					
Dates of proposed v	risit to CCSU:					
Visiting Scholar's co	untry of citizenship:					
Home address of the	e Visiting Scholar:					
	e expected to possess <b>excellent English language sk</b> ase describe the Scholar's level of English proficiency a	and your method of assessmen	it:			
Required Attachme	ents					
2. Completed	Surriculum Vitae Incoming J-1 Exchange Scholar Biographical Information Form of Scholar's Primary Purpose, including:	n (appended below)				
a. the Vis	siting Scholar's background and research interests;					
b. the Vis	siting Scholar's primary purpose for visiting CCSU;					
c. the len	ngth of time required to complete the Visiting Scholar's	responsibilities and objectives	;			
d. how th	ne Visiting Scholar's presence on campus will benefit th	ne host Department and CCSU	I in general.			
<ul><li>4. Letter of Fi</li><li>5. Copy of Pa</li></ul>	inancial Guarantee or Support from Sponsoring Agenc assport	y and Personal Bank Statemen	t.			
Funding Information	on					
local cost of living expen.	In accordance with Immigration regulations, Visiting Scholars ness. In addition, the Visiting Scholar will be required to purcha witation; it is not included in the monthly cost of living allowance	se CCSU-mandated insurance upo				
	colar be paid a salary by his/her home institution for the ar requesting a salary or cost of living supplement from		Yes □ No Yes □ No			
Please identify the so	ource(s) and amount(s) of all funding that will support to	the Visiting Scholar's stay:				
Source:	Amoun	t: \$	_			
Source:	Amount	:: \$	_			

Signatures		
CCSU Faculty Sponsor	Date	
Department Chair	Date	
Chair's Comments on arrangements above:		
Academic Dean	Date	
Dean's comments:		
ISSS Director	Date	
Provost/Vice President	Date	
Provost/V ice President	Date	

**Routing** - Once the sponsor of the Visiting Scholar has obtained the signatures of his or her Chair and the Dean, the signed original and attachment should be forwarded to the International Student and Scholar Services for routing to the provost. If approved, the ISSS will send copies to all parties above, as well as to Chief Human Resources Officer, the Department Secretary, and Host Faculty.

# **Biographical Information**

# Instructions:

This form is to be completed by the Incoming Visiting Scholar and sent directly to the International Student and Scholar Services (ISSS), either by fax to (860) 832-2047 or as an attachment to an e-mail to hoado@ccsu.edu.

Name (please type/print):					
	First name	Middle Initial	Last Name		
Permanent Address:					
E-mail Address:					
		_			
Date of Birth:	(please write in full, e.g. June 5, 1965)				
City of Birth:					
Country of Birth:					
Citizen of	Legal l	Permanent Resident of			
Passport Co.			Country		
Employer:		Position Title:			
If this is a teaching position	on, what level do you t	teach?   Primary   Secondary	<b>1</b> University		
U.S. TRAVEL HISTOR	? <b>V</b> ∙		·		
		14 11 110			
Please provide information	n regarding your most	recent J1 visits to the U.S.:			
<u>Visa Type</u>		Dates in the U.S.	Purpose of Stay and Location		
	<u> </u>				
During this visit, will you l		y family members?	□ No		
			ise), and birth certificate (crind).		
Print the mailing address v	where your immigration	on documents should be sent:			
Name:					
In care of:					
Street Address:					
•	:/Building Number: _				
City:					
State/Province:					
Country:					
Postal Code:					

Important Immigration Regulation

Two-Year Participation Bar

At the end of the J-1 research scholar's/professor's exchange visitor program, regardless of the length of the stay (7 months, 2 years, or

5 years), the exchange visitor becomes subject to a "two year bar on repeat participation as a J-1 research scholar or professor." This

means that when a research scholar/professor completes his or her J-1 program participation, regardless of the length, the J-1 research

scholar/professor status is concluded and the individual is not eligible for another stay as a J-1 research scholar/professor until two

years have passed.

This bar is different from the two year home country residence requirement (see below) and only applies if the individual wants to

return to the U.S. in the J-1 research scholar/professor category. The two years can be spent in the U.S. in another J-1 category (i.e.

short term scholar or specialist) or in another immigration status, e.g. H-1B, if eligible.

Existing 12 month bar

There currently exists a 12 month bar for persons seeking to use the J-1 Research Scholar/Professor category. This bar applies to

individuals who have been in the U.S. in any J status (all categories except short term scholar, and including J-2 status) for six months

or more in the 12 month period immediately prior to the proposed start date on the new J program. Prospective J-1 research

scholars/professors who are subject to the two year bar on participation are not subject additionally to the 12 month bar.

Return this completed form to:

Central Connecticut State University

ATTN: Hoa Do

International Student and Scholar Services

1615 Stanley Street

New Britain, CT 06050

Fax: (860) 832-2047

E-mail: hoado@ccsu.edu

5