

Request for Invitation as an Academic Visitor to the University of Leicester

Please ensure you complete and submit this form a minimum of three months before the intend start date of your visit.

Part A: To be completed by visitor

Legal name in full	
Any other known by name	
Email address <i>This must be your home institution email address rather than a personal email address</i>	
Contact telephone number	
Current job title	
Current institution	
Home address	
Country of residence	
Nationality	
Highest qualification	
ORCID	
Start date of proposed visit	
End date of proposed visit <i>Please note, visits should be for a maximum of six months unless with exceptional approval from Head of School</i>	
Current employer	Name of line manager: Email address: Phone number: Address:
My line manager is aware of this visiting request and is supportive	YES/NO
Funding details of visit <i>eg. sabbatical salary, research grant</i>	
Name of University of Leicester academic host	
Reason for applying to visit the University of Leicester. <i>Please include details of any existing links and collaborations you have with the University of Leicester or staff at the University.</i>	
Short outline of proposed research that will be undertaken at the University of Leicester	
Anticipated outcomes of visit <i>eg. joint publications, delivery of lectures or seminars, student exchanges, staff exchanges, collaborative research</i>	
If you are requesting a visit of longer than six months, please provide reasons for requesting a longer visiting period and the added benefits this will bring to the University of Leicester.	

<i>This will only be approved where a longer visit has been specifically agreed as part of an existing grant or award.</i>	
Who will be paying the cost of the academic visitor fee? <i>The visit is charged at the prevailing rate (pro rata) for the visit. See here.</i>	Home institution/external grant/self-funded
Please provide the name and contact details of the person we should contact about fee payment (if you are not paying yourself):	

Please include the following documents (your application will not be considered without them)

- An up-to-date CV
- Two academic references, including one from your current manager
- A letter signed by your current head of department on institution headed paper confirming:
 - that you are an academic member of staff of your home institution;
 - that you will remain employed by them for the duration of your visit;
 - that your visit has the full support of your Head of School/Department;
 - that you will continue to receive your salary for the duration of your visit, or other evidence of funds such as an external grant;
 - that your institution has agreed to pay the cost of your visit (if relevant)

Please note, all documents must be translated into English.

Signature of academic visitor:

Date:

Please note: Submission of this form does not guarantee that you will be accepted as a visitor. Please do not start to make any arrangements for your visit until you have received confirmation that your visit request has been approved and you have received a formal letter of invitation from the University of Leicester.

Part B: To be completed by academic host

We would strongly encourage you to have a provisional Teams call with the prospective visitor before agreeing to host them at the University of Leicester to better understand their reasons for requesting to visit and ensure their research interests are aligned with those of the School/Department.

Name of host	
School they will be based in	
Identity of visitor has been confirmed? <i>This should be done through a Teams call with the visitor to view their passport and likeness.</i>	Yes/No
Confirmation that the visitor has a satisfactory level of English language skills to undertake research?	Yes/No

<i>This should be confirmed as part of Teams call.</i>	
Who initiated the visit?	Visitor/academic host
What benefits will the visit bring to the University of Leicester?	
Please detail how the visitor's proposed research align with the strategic research direction of the School?	

Signature below confirms that you are supportive of this visit and will take responsibility for the academic visitor for the duration of their visit.

Signature of academic host:

Date:

This signed form should now be submitted to your School for the next stage of approval.

Part C: To be completed by Head of School/Department

Are you satisfied that this visit aligns with the research interests of the school/department?	
Are you happy you can accommodate this visitor in your school? <i>To discuss in liaison with Operations Manager</i>	
If approving a visit of over six months, are you satisfied that this is appropriate?	
Does this visit meet the criteria for a review from the Trusted Research Team ? <i>The visitor is coming from overseas or is an overseas national.</i>	Yes/No <i>If yes, please complete the Trusted Research Assessment process and add the completed documentation to the pack</i>
If yes, please provide TRA reference number and attach confirm of their approval and any comments provided.	
If no, please provide a brief justification of why you did not feel this visit required review under Trusted Research	
What fee will be charged?	

Signature below confirms that the Head of School/Department has approved this visit, will be putting it forward for review by the College Committee, and that the application has been logged by the School/Department administration team.

Signature of Head of School/Department:

Date:

If approved, please confirm back to the Academic Host that this will be put forward for review by the college committee.

If not approved, please confirm back to the Academic Host and ask them to advise the applicant that unfortunately we cannot host their visit.

Part D: To be completed by College Committee, including College Dean of Research and Enterprise

The College should review the information provided by within the Trusted Research Review to ensure that no risks have been identified and confirm that nothing is known at a college level that would prevent the School/Department hosting this visit.

Signature below confirms that the College approve this visit on behalf of the University of Leicester.

Signature of Head of College:

Date:

If approved, please confirm back to the School/Department and Academic Host. If required, they should now liaise with their visitor to arrange ATAS. The Letter of Invitation will not be issued until satisfactory ATAS clearance has been provided.

If not approved, please confirm back to the Academic Host and ask them to advise the applicant that unfortunately we cannot host their visit.

Part E: Letter of Invitation issued by School/Department with Visitor Agreement

Part F: Induction arrangements