DIVISION OF BIOLOGY & BIOLOGICAL ENGINEERING Recommendation for Appointment <u>Visitor</u>

Visitors are appointed for limited terms up to one year.

They may be full-time or part-time, paid or unpaid, but they must have a position elsewhere. Visitors are not members of the faculty. They are entitled to a "visitor" identification card for access to campus facilities, and listing in the campus directory, and are not eligible for membership in the Athenaeum.

					Optio	n Inf	or	mat	ion					
Faculty sponse	or:					Oı	otic	n:						
Prepared by:									Ext.					
Please list the Caltech mail code and office assignment for Visitor:														
Mail Code:								Ext.:						
Candidate Information														
F. 11					unun	ute 11			<u> </u>					
Full name:														
Address:														
Phone:					:									
Birthdate:				e of b	ty,									
Citizenship:				M	arit	al st	atus:	:						
Visa status (for nonresident aliens currently in the U.S.) For H1-B visa-read this first http://international.caltech.ed			Type visa:				Exp. Date:							
If family members will accompany NONRESIDENT ALIEN, provide the following information for each family member:														
Name Relation		ship Birthdate		Birthplace (city, state, country)					Citi	zenship				

		Candi	date's Per	manen	t Position	(Info	Required)		
Employer:									
Title:						T.	lire date:		
If nonreside the outside funded peri minimum, i	supporting ag	pe supported by gency. A letter fro INCLUDED wit nonresident alie	om the prov h this form	vider of	funding, ir	unt of si	upport and the	and the	
US\$:		Agency: Pro	ofessiona	l Exper	ience				
			Academ						
Degree	N	1ajor	Year Granted			S	School		
			Positio	ns Held	[
		App	ointmen	t Infor	mation				
	ords Office s	ns must be subm ubmission dead							
Period of appointment (how many months):				Propos effectiv					
Part-time or full time?				If part-time, # of days a month at Caltech?					
Caltech sala if provided:	iry amount,				Currett	-			

Budgets to	be charged:		Alias #	Percentage:	Percentage:						
PTA#	<u> </u>				0						
Health insurance coverage is required. If visitor will be paid a minimum of \$1,000/mo from Caltech											
funds, he/she is eligible for staff benefits. If visitor will be funded by an outside agency, indicate who will pay for health insurance: the appointee, outside supporting agency, or the host's Caltech account											
(provide PTA#)											
Health insurance will be paid by:											
Tenut housine will be pain by.											
C 1 A 1	1										
Special Allowances											
Are you providing for housing, or travel expenses? If yes, list the maximum \$ amount and the POETA											
here: Reimb	oursements of this type	are administer	ed by the	department.							
Amount:			PTA#								
Place prov	ide a brief summary of	Research to l									
Tlease prov	ide a brief summary of	candidate s res	earch to b	econducted.							
Division Approval Process											
Eggultu oca a	ncar's				Data						
Faculty spo signature	HSOF S				Date						

Submit form and CV to Stefany Nielsen, BBE Division Office, snielsen@caltech.edu