## AFFILIATE ACADEMIC SCHEME

#  PROPOSAL FORM

To be completed by department (PLEASE COMPLETE IN CAPITALS)

***Any incomplete forms will be returned.***

|  |  |
| --- | --- |
| **Surname:** |  |
| **First Name:** |  |
| **Title:** |  |
| **Date of Birth:** |  |
| **UCL Department:** |  |
| **Start Date:** |  |
| **End Date:** |  |
| **Country of Origin:** |  |
| **Is a Sponsored Researcher Permit Required?** |  |
| **Present Post and Institution:** |  |
| **Full Contact Address of Affiliate Academic:** |  |
| **Fee to be Charged:** | Standard fee |
| **Bench Fee (if any):** |  |
| **Will the Academic use the library?** |  |

Account number to which the departmental share of the fee is to be credited (N.B. Please check the Account Code you quote is valid using the [Project Validator](https://www.ucl.ac.uk/finance/finance-systems/data-codes):

|  |  |
| --- | --- |
| **Account Number:** |  |

Failure to supply a valid account code will result in the invoice being delayed as Finance will not process any invoice we supply with invalid account codes.

Below are the details required to create the position in Oracle for the relevant Affiliate Academic.

|  |  |
| --- | --- |
| **Position Number:** |  |
| **Supervisor:** |  |
| **Organisation Code:** |  |
| **Gender:** |  |
| **Any other points to be noted:** |  |

|  |  |
| --- | --- |
| Name of Head of Department: |  |
| Name of Departmental Contact: |  |
| Date: |  |

## Please append a copy of the Applicant’s CV, Statement of proposed work and sponsor letter if applicable while at UCL

**PLEASE RETURN THIS FORM TO**

HR SERVICES