



University of Otago, Christchurch

Application for permission to host visiting researcher or visiting research student (excludes Medical Electives)

<input type="checkbox"/>	Visiting Associate: (two weeks or less)	A visitor to the Campus to collaborate with UOC staff, without formal title and without emolument with wireless access to the guest network.	
<input type="checkbox"/>	Visiting Appointment: (more than one week)	A visitor to the Campus to engage in collaborative research, without formal title and without emolument for up to 6 weeks.	
<input type="checkbox"/>	Visiting Fellow	A fixed term appointment normally for not less than 6 weeks and not more than one year with or without emolument. <i>Do not use this form.</i> Contact Department Administrator to proceed with formal appointment through HR.	
<input type="checkbox"/>	Visiting Research Student (University of Otago)	A student formally enrolled in University of Otago at another campus visiting UOC for more than one week.	
<input type="checkbox"/>	Visiting Research Student (Other Institution)	A student formally enrolled through another Institution visiting a UOC research group/department for more than one week.	
Name of Visitor			
Visitor's email address			
Visitor's Institution (if applicable)			
Host Department			
Staff member hosting visitor			
Physical location of visitor on Campus			
Purpose of visit			
Duration of Visit		Start date:	End date:
Health and Safety Induction has been arranged (if the visitor will be working in labs)		YES / NO	

IT access (cost \$140 per annum)	YES / NO If yes: Charge to account code _____ / charge to visitor
Laboratory costs (if applicable)	YES / NO If yes: Charge to account code _____ / charge to visitor
Other costs (eg telephone calls, consumables, stationery)	YES / NO If yes, Charge to account code _____ / charge to visitor
Does the visitor have bench fees from their host institution/ funder?	YES / NO If yes, amount \$ _____ Administration Fee \$1,250 (see note 4) Total Paid \$ _____ Pay bench fees to account code _____

SIGNATURES/ APPROVALS	Signature	Date
Staff member hosting visitor		
Head of Department		
Associate Dean, Research, UOC		
Dean, UOC		

Notes:

1. This form is intended to record visitors to the University of Otago, Christchurch who will be engaged in collaborative research with UOC staff and postgraduate students.
2. This form should **not** be used for medical electives students, contact our electives administrator electives.uoc@otago.ac.nz for current guidelines.
3. If overseas visitors require a formal letter from the University of Otago for visa purposes or for their home institution then a separate memo to Human Resources must be attached to this form. Contact your Department Administrator for assistance.
4. Administration Fee (NZ \$1,250.00). A non-refundable administration fee is payable where existing collaborations do not exist. This payment, along with any bench fees payable, should be paid through direct bank transfer to the following account.

Account Name: University of Otago
Account No: 06-0901-0001203-00
Swift Address: ANZBNZ22 (for payments outside NZ)
Reference: GL10PIA06123100 Visiting Researcher