Invitation of an Academic Visitor

(Technion Fund)

must be sent with C.V, list of publications + letter from the host + the approval of the faculty preparatory committee

Date:		
To: The Executive Vice President for Academic	Affairs	
From: Head of the department	Department:	
Given Name:	Surname:	
I.d./Technion no. :	Nationality:	
Permanent place of work:		Position:
Period of visit at the Technion: from	until	
The host– name of a faculty member: (who will be in Israel during that time)		Phone no
Position offered:		
Occupation of the visitor at the Technion	:	
Research topic:		
Undergraduate/Graduate course– catalog no.		
Seminar topic:		
* employer expenses will be added		
Please indicate the faculty priority in relation t	to other candidates this ye	ear
Signature: Head of the department	Host	Date:
Budget Approval:		
Approved from:until:	nc	o. of months:
Monthly stipend:	_ Plane ticket:	Sum:
Approval no Bu	dget no	
Date: Name & signature	e:	
Exceeding the budget framework: No op	otion optional until:	