**Academic Visitor – Request for Invitation Letter Form**

### Please read the guidance notes before completing all sections of this form. Please attach a CV.

### *Please note, only Academic Visitors whose visit lasts for more than 2 weeks will receive a formal invitation from Human Resources, if the visit is less than 2 weeks the School/Department can invite them directly.*

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Hosting School/Department |  | | | | | | | |
| Hosting academic |  | | | Email: | | |  | |
| Visitor's Title\* | Mr Mrs Miss Ms Dr Professor Other: \*delete as appropriate | | | | | | | |
| Visitor's Forenames |  | | | | | | | |
| Visitor's Surname |  | | | | | | | |
| Visitor’s Date of Birth |  | | | | | | | |
| Address for Correspondence  *(Please indicate both home and business address)*  *(This should not be the Department at Loughborough University)* | HOME | | | | BUSINESS | | | |
| Visitor’s Email Address |  | | | | | | | |
| Nationality & Gender |  | | | | | | | |
| Dates of Visit (day/month/year) | From To | | | | | | | |
| Accommodation arrangements **(please indicate who is responsible for these arrangements and the local address (if known)** |  | | | | | | | |
| Purpose of Visit (it is important to clarify whether the visitor will engage in collaborative or independent research) |  | | | | | | | |
| Anticipated outcomes from visit  *(e.g. joint publications, student exchanges, staff exchanges, collaborative research etc.)* |  | | | | | | | |
| Bench fee payable *(a charge requested from visitor at School/Department’s discretion for use of LU resources )*  ***Human Resources do not raise an invoice for the bench fee, please see the guidance notes or speak to your Finance contact for further information.*** | | | Yes | | |  | No |  |
| Amount of bench fee | £ | Charge code |  | | | | | |
| Details of any payments to be made to the visitor (please tick)  **PLEASE READ SECTION 2. of the Guidance Notes** | * The visitor will receive no payment, either from the University or from another source (including from outside the UK) during the visit. * The visitor will not receive any payment from this University but will receive payment from another source (e.g. research council or overseas employer). Please provide details. * A payment \*of/up to £\_\_\_\_\_\_\_\_\_ is to be made to the visitor to cover living expenses.(\*delete as appropriate)   Is the payment from a UK source: **\*YES/NO** (\*delete as appropriate  This will be paid as follows **(please ensure you now tick one of the following boxes):**   * A) The sum above should be paid monthly in equal instalments towards travel, accommodation and subsistence during the visit which should be subject to Income Tax and National Insurance deductions through the Payroll system. * B) Reimbursement is to be made for expenses incurred, such as travel, accommodation and subsistence; payment should be made by completing an E1 claim form, once the Department has checked the receipts and agreed payment. This also applies to unreceipted expenses.   Allocation Code (if any): | | | | | | | |

Signed: …………………………………………..(DOS / HOD) Date: ……………………………………

Signed: ………………………………………….. Date: ……………………………………

(School Hosting contact)