



UICS Visiting Fellow Form 02

University of Seychelles International Collaboration Scheme

NOTE: The UICS Visiting Fellow Form 02 should be completed by visiting fellows seeking to collaborate with UniSey. Completed form and any relevant documents must be submitted **one month** prior to the visit, to the UniSey Global Office email address: Global@unisey.ac.sc

Personal Details	Nature of Collaboration																				
<p>Name(s):</p> <p>Surname:</p> <p>Country:</p> <p>Date of Birth: __/__/____ Sex: M/F</p> <p>Passport Number:</p> <p>Email:</p> <p>Postal Address:</p> <p>Contact Number(s):</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; padding: 2px;">Visiting researcher scholar</td> <td style="width: 20%; text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Visiting student researcher</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Visiting Professor</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Visiting Fellow</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Visiting lecturer/Senior lecturer</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Visiting academic</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Non-academic visitor</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Visiting research fellow</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td style="padding: 2px;">Visiting Senior research fellow</td> <td style="text-align: center; padding: 2px;"><input type="checkbox"/></td> </tr> <tr> <td colspan="2" style="padding: 5px;"> <p>Other (<i>Please specify</i>):</p> <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div> </td> </tr> </table>	Visiting researcher scholar	<input type="checkbox"/>	Visiting student researcher	<input type="checkbox"/>	Visiting Professor	<input type="checkbox"/>	Visiting Fellow	<input type="checkbox"/>	Visiting lecturer/Senior lecturer	<input type="checkbox"/>	Visiting academic	<input type="checkbox"/>	Non-academic visitor	<input type="checkbox"/>	Visiting research fellow	<input type="checkbox"/>	Visiting Senior research fellow	<input type="checkbox"/>	<p>Other (<i>Please specify</i>):</p> <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>	
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Home Institution/Organisation	Contact person at home institution/organisation																				
<p>Home Institution/Organisation Name:</p> <p>Address:</p> <p><i>(If a Student)</i> Student ID Number:</p> <p>Current Study program:</p> <p><i>(If aStaff)</i> Post Title and Department:</p>	<p>Name:</p> <p>Post Title:</p> <p>Department:</p> <p>Email Address:</p> <p>Contact Number:</p>																				

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Brief description for collaboration (<i>if doing research work, also include details of research</i>)	
Type of facilities required	Proposed length of stay:
Computer/Internet <input type="checkbox"/>	From: To:
Desk <input type="checkbox"/>	
Library <input type="checkbox"/>	
Study Room <input type="checkbox"/>	
Other (<i>please specify</i>): <input type="text"/>	<i>*For accommodation, fill in the accommodation form</i>
<p>* A processing fee of €20 must be submitted with this form.</p> <p>*A bench fee of €200 is charged for the use of facilities and any other administrative and on-going support provided by the Global office and other departments.</p>	<p>I certify that all the information provided is accurate</p> <p><input type="text"/> <input type="text"/></p> <p>Signature Date</p>
Identify source of support for the duration of stay (i.e. personal savings, sabbatical income, employer, scholarship or grant) (NOTE: Visiting fellows DO NOT receive salary compensation from the University)	

The following must be attached with the form:

- o 2 passport photos,
- o A copy of information page on passport
- o Curriculum Vitae
- o Research project description/plan of activities
- o Letter of recommendation from institution
- o Proof from institution confirming status (Registration/Enrolment)
- o Proof of adequate financial capability such as bank statement or letter from a bank (to cover accommodation, cost of living, transport and personal expenses)
- o Proof of Health/Medical Insurance to cover fellows during their stay.

BANK DETAILS FOR TRANSFER OF FUNDS FROM OVERSEAS BANKS TO LOCAL ACCOUNT (NOUVOBANQ SIMBC)

CURRENCY TRANSFER----- EURO

CORRESPONDING BANK DETAILS

STANDARD CHARTERED BANK (GERMANY) GMBH
FRANKLINSTRASSE 46-48
60486 FRANKFURT AM MAIN
GERMANY
IBAN-----DE 58512305000018110402
SWIFT CODE-----**SCBLDEFX**

BENEFICIARY'S BANK

ACCOUNT NUMBER -18110402
NOUVOBANQ SIMBC
VICTORIA HOUSE
PO BOX 241, VICTORIA
MAHE
SEYCHELLES
SWIFT CODE -----**NOVHSCSC**

BENEFICIARY'S ACCOUNT DETAILS

ACCOUNT NUMBER: 01002-038225-00-6

ACCOUNT NAME: The University of Seychelles

AND ADDRESS: P.O.Box 1348, Victoria, Mahe
Seychelles

PURPOSE OF PAYMENT; _____



University of
Seychelles

For Official Use

Application Receipt Date		Accommodation Attained	
Date Applicant informed		Accommodation as per preference?	

ACCOMMODATION APPLICATION FORM

PLEASE USE BLOCK LETTERS. Tick

boxes as appropriate.

APPLICANT'S DETAILS

Given Name(s)

Surname

Date of Birth

Gender

M

F

(dd/mm/yyyy)

Nationality

Country of Origin

Religion/Faith

Racial Background

Address for

Correspondence

Contact Number

Email

Address

EMERGENCY CONTACT

Given Name(s)

Surname

Contact Address

Contact Number

Email Address

PROGRAMMES DETAILS

Diploma First degree Postgraduate

Others

ACCOMMODATION REQUIREMENTS

House/Apartment shared with other students House/Apartment not shared with others

Homestay (a room in a family house)

Number of room(s) required

Special needs requirements

DECLARATION

I agree for a representation of UniSey to identify and secure an accommodation on my behalf as per description on this form. I understand that I will have to sign my own accommodation lease with the respective landlord upon my arrival in the country and prior to moving.

I declare that all the information given above is true.

Signature

Date

Please submit by:

Post: UniSey Global Office
University of Seychelles
PO Box 1348
Anse Royale
Mahé
Seychelles

Email: Global@unisey.ac.sc