

INTERNATIONAL VISITOR APPLICATION FOR RU ACADEMIC DEPARTMENTS

Please submit the following required documents to the McGlothlin Center for Global Education and Engagement:

- 1. Complete enclosed form
- 2. Proposal
- 3. Invitation Letter and/or hiring contract
- 4. Proof of English Proficiency documentation

Important Notes

- Immigration authorities require all international visitors must have adequate health insurance coverage that
 meets Department of State requirements. Visitors will have to show proof of purchase of such a policy if not
 provided by Radford University as part of their employment benefits. If the visitor does not have adequate
 coverage, of if they prefer, The McGlothlin Center for Global Education and Engagement has options for
 purchasing short-term insurance. Please note that government regulations also require dependents to have
 health insurance coverage.
- If the funding source for the visitor is other than a Radford University salary or stipend, an official financial sponsorship letter must be provided by the visitor. All financial statements must be in English and US dollars. A financial statement must show the following amounts are available in the account:
 - Visitor: USD \$30.000
 - Spouse: USD \$10,000 (if coming to the U.S.)
 - o Children/Dependent: USD \$5,000 per children (if coming to the U.S.)

For more information about this application, please contact the McGlothlin Center for Global Education and Engagement by calling (540) 831-6200 or emailing globaled@radford.edu.

When ready, please submit all paperwork to:

International Student & Scholar Advisor McGlothlin Center for Global Education and Engagement Cook Hall #105, Box 7002

Email: globaled@radford.edu



INTERNATIONAL VISITOR APPLICATION FOR RU ACADEMIC DEPARTMENTS

Step 1: Academic Department & Faculty Sponsor Information

	Department Address:			
Department Telephone:	Department Telephone:			
aculty Sponsor Email:	aculty Sponsor Email:			
tep 2: About the Visitor lame of Visitor: last Name	tep 2: About the Visitor lame of Visitor:			
Iame of Visitor: Last Name First Name Middle Name Visitor's Home Country: rospective Position: Professor Research Scholar Short-Term Scholar rimary Activity of Visitor: Research Activity End Date: Activity End Date:	Iame of Visitor: Last Name First Name Middle Name			
Last Name First Name Middle Name Mid	lame of Visitor: Last Name First Name Middle Name			
Prospective Position: Professor Research Scholar Short-Term Scholar Primary Activity of Visitor: Teach Research Activity End Date:	rospective Position: Professor Research Scholar Short-Term Scholar Administrative/Staff ctivity Begin Date: Activity End Date:			
Prospective Position: Professor Research Scholar Short-Term Scholar Primary Activity of Visitor: Teach Research Activity End Date:	rospective Position: Professor Research Scholar Short-Term Scholar Administrative/Staff ctivity Begin Date: Activity End Date:		First Name	 Middle Name
rimary Activity of Visitor: Teach Research Activity End Date: Activity End Date:	rimary Activity of Visitor: Teach Research Administrative/Staff Activity Begin Date: Activity End Date:			aute riame
ctivity Begin Date: Activity End Date:	ctivity Begin Date: Activity End Date:	☐ Research Scholar	☐ Short-Term Scholar	
		Research	☐ Administrative/Staff	
riafly Describe Activity While At Padford University: (Plagsa ha specific)	riefly Describe Activity While At Radford University: (Please be specific)	Ac	ctivity End Date:	
Helly Describe Activity Willie At National Office Sity. (Flease be specific)		Jniversity: (Please be spe	ecific)	
Then bescribe Activity while At Nauroru C			☐ Research Scholar ☐ Research	Research Scholar Short-Term Scholar Research Administrative/Staff Activity End Date:



Step 3: Funding Information

Will The Visitor Be Paid By Radford Un	ersity? Yes No	
Will The Visitor Be Eligible for Radford	Iniversity Benefits?	
Will the Visitor Be Eligible for Radford	niversity Employee Health Insurance?	
Source(s) of Funding: (Please write \$0	r N/A where it doesn't apply)	
Radford University: \$	Academic Department:	
U.S. Government: \$	* Agency:	
Grant: \$	Name of Grant:	
Home Country Government: \$	Country and Agency:	
International Organization: \$	Agency:	
Private Foreign Sponsor: \$	Name of Sponsor:	
Private U.S. Sponsor: \$	Name of Sponsor:	
Personal Funds: \$	Attach Bank Statement or Bank Letter	
Other: \$	Source of Funds:	
·	ant, home country government, an international organization, or a private for ement?	oreigr
Step 4: English Language Proficiency		
, ,	ovide proof that their English language proficiency is sufficient enough to fur ficient enough in the English language to be able to participate in his/her basis?	nction
If yes, which of the following methods	vas used to measure the visitor's English proficiency?	
☐ A recognized English languag	test (such as TOEFL or IELTS) (Please attach a copy of the score report)	
\square An attestation/official docum	nt from an Academic institution or English program certifying English Profic	iency
	ucted by the academic department (or the McGlothlin Center for Global requested), either in-person, video or phone. (If this option is selected, plealuded on this packet.)	ase



Step 5: Approval Signatures

Name of Individual Completing This Form:	Date:
Department Chair's Signature:	Date:
Dean's Signature:	Date:
Human Resource's Signature:	Date:

When ready, please submit all paperwork to:

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