

International Visiting Scholar

Faculty Host Form

Internal Use Only

PLEASE NOTE:

IF WORKING WITH UAB ISSS TO OBTAIN A J-1 VISA, ALL COMPLETED FORMS, INCLUDING THE SIGNED OFFER LETTER FROM INTERNATIONAL MEDICAL EDUCATION, SHOULD BE SENT TO UAB ISSS **3 MONTHS PRIOR** TO THE PROPOSED OPPORTUNITY BEGIN DATE.

INTERNATIONAL VISITING SCHOLAR (IVS) Faculty Host Information Form

Thank you for serving as a UAB faculty host for an International Visiting Scholar (IVS). Your commitment to offering these opportunities not only strengthens UAB's teaching mission but also empowers international professionals, scholars, and students to become global leaders in science, education, health, and research. Together, we are fostering innovation and collaboration that enhances the quality of life both within the Birmingham community and across the world.

NOTE: Please submit this form at least four months prior to the proposed start date to ensure timely processing.

Please provide the following information to assist in the preparation of the offer letter for your international visitor.

(International Medical Education will draft the offer letter based on your responses)

UAB Faculty Host Information

- Name:
- Email:
- School:
- Department Name:
- Division Name:
- Short Academic Bio of Faculty Host:

Department HR Staff Information

- Name of your HR Staff Assisting with Processing:
- Email of you HR Staff Assisting with Processing:

Faculty Host's Chair Information

- Name of Chair:
- Email of Chair:
- Title of Chair:

Is this for an extension or new arrival? Extension New Arrival

Full Name of International Visiting Scholar (First, Middle and Last):

Email of International Visiting Scholar (IVS):

Opportunity Details

Please select the category of the activity (select one):

Dual activity (select one):

Proposed Start Date:

Proposed End Date:

If participating in an observership, list any additional Faculty, (beyond the primary UAB host) for the visiting scholar to observe with. Include their **Department/Division and Faculty email**:

Where will the activities take place (list all UAB buildings)?

What is the primary location (Room, Lab, or Floor) of where the opportunity will take place?

What UAB information/data servers will the IVS access (N/A if none)?

What major equipment will the IVS use while at UAB?

If research, what is the subject of the research?

If observership, what will the IVS be observing? Please provide details.

Data and Compliance Information

Will the IVS access identifiable human subject or confidential patient data? Yes No

If yes, provide the name and number of all approved IRB protocols that the IVS will be added to before participating in the proposed activities. **Please send IME a copy of your approved IRB protocol letter with the completed host form.**

Will the IVS perform activities using animals for research, teaching, and testing? Yes No

If yes, provide the name and number of all approved IACUC protocols that the IVS will be added to before participating in the proposed activities. **Please send IME a copy of your approved IACUC protocol letter with the completed host form.**

Expectations and Participation Details

Describe the tasks, duties, or activities the IVS is expected to participate in while at UAB:

Expected hours per week for participation:

If participating in both, research and observership, outline the weekly breakdown of hours for each:

- Research: _____ hours/week
- Observership: _____ hours/week

What are the expected outcomes of the IVS's work at UAB? (Select up to three or enter in other)

Other:

HR and Funding Information

HR Category for the IVS:

Volunteer (NO Pay, NO Benefits) – HR 60
Irregular Employee (Pay, NO Benefits) – HR 04
Temporary Employee (Pay and Benefits) – HR 02

Will the UAB Faculty Host provide any funding to the IVS for living expenses?

If yes, provide the hourly and monthly amount of support from UAB:

Source of Funding (grant name/number, Oracle, Account #, etc.):

Will the IVS receive funding from an international scholarship for living expenses? Yes No

If yes, what is the monthly amount?

Will the UAB Faculty Host provide other financial support to the IVS?
(Travel Expenses, honorarium, reimbursements, etc.)?

If yes, what is the **total amount** and **source of funding**?

- Total amount:
- Source:

Explanation of additional funding provided (travel expenses, honorarium, etc.)

Will the IVS pay any fees/cost to UAB for this opportunity? Yes No

If yes, provide the **total amount** and **source of funding**:

- Total amount:
- Source:

----- **END OF FACULTY HOST INFORMATION FORM** -----

Please send this completed Faculty Host Information Form to ivs@uab.edu

Next Steps:

1. International Medical Education (IME) communicates directly with the International Visitor Scholar (IVS) to complete their international visitor application.
2. Once the IVS fully completes their international application, IME will draft the offer letter.
3. IME will send a draft of the offer letter to the UAB Faculty Host for approval. When approved, the UAB Faculty Host will place the approved offer on department letterhead and return the offer letter back to IME at ivs@uab.edu
4. IME will distribute the approved offer letter via Adobe Sign for all signatures.
5. IVS works with UAB ISSS, Occupational Health, Risk Compliance and Departmental HR regarding immigration processing, health clearances, data security matters and being added to any required protocols.

Contact International Medical Education at ivs@uab.edu or 205-934-6666 with any questions.