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| Visiting Appointment Application Form |  |

## Application Process

1. **Complete this form and send it, along with a copy of your latest CV, to** [**lse\_health@lse.ac.uk**](mailto:lse_health@lse.ac.uk)**.**

## Applicant Information

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Full Name: |  |  | Title: |  | | |
|  | First name | Surname |  | *Prof / Dr / Ms / Mr / Mx / etc.* | | |
| Appointment type:  Visiting Fellow  Visiting Senior Fellow  Visiting Professor  Visiting Professor in Practice | | | | | |
| |  |  | | --- | --- | | Requested Start Date: |  | |  |  | | | | | | |
| Requested Duration:  1 Year  2 Years  3 Years | | | | |  | | |

Is this application a request for renewal?  Yes  No

|  |  |
| --- | --- |
| Email: |  |

## Participation and Statement

**1 / Statement.** Please outline your reasons for this application. Your statement must include information about your planned contribution(s) to LSE Health, how you expect the department to benefit, and the benefits the fellowship will bring to your own career. (No less than 200 words)

[Insert statement here]

**2/ Renewals only.** In addition to the above supporting statement, please also provide a statement outlining details of your contribution to LSE Health during your previous appointment. (No less than 200 words)

[Insert statement here]