

Office of Faculty Affairs

Visiting Scientist/Visiting Graduate Student Reappointment Form

Name of Visiting Scientist		
Department/Center/Program		
Sponsoring Faculty Member		
Current Appointment Dates: From:	To:	
Reappointment Dates: From:	To:	
Home Institution		(note: appointments ordinarily end 6/30/YR)
Title at Home Institution		

Activities Report for Appointment Term Completed

Please describe the activities and contributions the visiting scientist made to the department and HSPH during the past appointment year.

Anticipated Activities for New Appointment Term

The visiting scientist will be engaged in (check one):

research grant #, granting agency, title and PI	publications
Teaching course number and title:	mentoring students, residents, or postdocs provide name(s):
academic program development name program	serving as liaison with community organization name of community organization:
other (please describe below)	

Will the visiting scientist be based at HSPH?	Yes	No
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If no, how often will the visiting scientist be present at HSPH?



Please describe the role of visiting scientist in the department and her/his contributions to HSPH.

Sponsoring Faculty Member's Signature

Date

Department Chair Signature

Date