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| **Official Visit Application Form****Moscow Polytechnic University****Office of the International Integration Directorate**  |
| **To enable Moscow Poly to assess if we are able to accommodate your request, please complete** **ALL SECTIONS of this form at least 20 business days (4 weeks) prior to proposed visit date.** |
| **Date of request** |  |
| **Person making visit request** |  |
| *Title:*  | *First Name:*  | *Last Name:*  |
| *email:*  | *Tel:*  |
|  |
| **Proposed date of visit** |  |
| **Proposed start time** |  |
| **Proposed end time** |  |
| **Name of delegation or visiting group** |  |
| **Number of visitors** |  |
| **Leader of delegation / visiting group** |  |
| *Organisation:* |
| *Title:*  | *First Name:*  | *Last Name:*  |
| *Tel:*  | *Fax:*  |
| *email:*  |
| **Names of delegates / visitors***(Attach extra names on separate page if necessary)***Please Note:** We require a **complete** list of delegates for assessment. Should the delegates list change after acceptance of a visit, we reserve the right to cancel the scheduled visit. |
| **Title**(Mr, Ms, Dr, Prof) | **First Name** | **Last Name** | **Position**  **Institution** (if different from above) | **CV / Bio attached? (Yes/No)**(for Academic Delegates) |
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| **Specific members of Moscow Poly staff whom the delegation would like to meet**(if known)  |  |
| **Purpose of visit** (please provide specific details) |   |
| **Areas/topics/research themes for discussion****(Specific areas of interest)** |  |
| **Background of your institution / organisation** |  |
| **Website address of your institution / organisation** |  |
| **Does either your organisation or delegates have any previous association with Moscow Poly?** **If so, please tick as appropriate** | ☐Faculty staff exchanges☐Research collaboration (specify area)☐Student exchange partnership (provide details)☐Existing agreement/MOU☐Graduate and/or undergraduate programs (please specify)☐Partnership in organization and/or joint event☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **List any previous visits to Moscow Poly. Please include the name(s) and position(s) of the visitor(s) and the date(s) and outcome(s) of the visit** | None |
| **Contact details in Moscow** | Mobile/cell phone no: Hotel name and address: |
| **Special needs e.g. provision for walking difficulties, dietary requirements (if required)** |
| **Other notes****(Attach extra pages if necessary)** |  |

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**Thank you for completing this form.**

Please email this form to: international@mospolytech.ru

The Protocol Officer will contact you by email to confirm if we are able to accommodate your visit request.