



Application for the Robert and Rene Glidden Visiting Professorship

Name of Proposed Visiting Professor: _____

Visiting Professor University or Affiliation: _____

Academic Year of Visit: _____

Projected Date(s) of Visit: _____

Funding Amount Requested: _____

Hosting Department/School/Program: _____

Please attach the following to this form:

- * A nomination statement.
- * A complete, up-to-date curriculum vitae for the nominee.
- * A letter from the candidate certifying his/her availability for the professorship.
- * Supporting letters from other departments or programs involved in hosting the candidate, if applicable.
- * A budget detailing the basis for the funding request.

Please obtain all applicable signatures below. If a signature does not apply indicate with "N/A".

Nominator Name (please print/type) Signature Date

Chair/Dir/Prog Head Name (please print/type) Signature Date

Dean Name (please print/type) Signature Date

For Committee Use Only

Approved Amount approved: \$ _____

NOT Approved

Notes: _____
