• Cindy Voelker (VTPB), cvoelker@cvm.tamu.edu 845-3365

Form must be submitted a **minimum** of **3 Months Prior to Visit *(6 mo. preferred)***

**Routing:**

Faculty prepares form then routes to:

1. **CVM International Program Director** - ***Linda Logan*** ***(******LLogan@cvm.tamu.edu******)***

\*Copy Business Administrators – ***Erika Walker*** ***(******ewalker@cvm.tamu.edu******) & Cindy Voelker*** ***(******cvoelker@cvm.tamu.edu******)***

1. **Departmental Program Coordinators** - ***Elaine Lippard (******elippard@cvm.tamu.edu******) & Laura Beach (******lbeach@cvm.tamu.edu******)***\*Include a Visiting International Scholar/Student Schedule for each individual visitor
* Elaine & Laura contact Host sponsors and visitors about clinical assignment preferences
1. Final form AND visitor’s schedule to:
* Elaine Lippard (VSCS),***elippard@cvm.tamu.edu*** 845-0341
* Laura Beach (VLCS), ***lbeach@cvm.tamu.edu***845-9160
* Sharon Dickerson (Necropsy), ***sdickerson@cvm.tamu.edu***845-4654
* Gwen Levine (Diagnostics), ***glevine@cvm.tamu.edu***862-1939
* VMTH HR ***HR-VMTH@cvm.tamu.edu***862-1320

**FINAL COPY w/signatures RETURNED TO**

* Erika Walker, ***ewalker@cvm.tamu.edu*** 845-8612
* Cindy Voelker, ***cvoelker@cvm.tamu.edu*** 845-3365
* Host & Faculty Sponsor

**Limit of Visit – 6 weeks**

(**May** and **June** are **NOT** available for scheduling groups in the clinic

**International Visiting Scholar/Student**

**Authorization Form**

**College of Veterinary Medicine & Biomedical Services**

**FACULTY SPONSOR INFORMATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Faculty Sponsor Name*** |  | ***Department*** |  | ***Email*** |  |
| ***Signature*** |  | ***Date*** |  | ***Cell Phone*** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***CVM International Programs Director*** | Linda L. Logan | ***Email*** | LLogan@cvm.tamu.edu | ***Cell Phone*** | 979-676-0820 |
| ***Signature*** |  | ***Date*** |  |

**VISITOR INFORMATION Total Number of Faculty Sponsored Students: \_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Visitor Name*** |  | ***Home Institution*** |  | ***Country*** |  |
| ***Email*** |  | ***Cell Phone*** |  | ***Arrival Date*** |  | ***Departure Date*** |  |

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| --- | --- | --- | --- | --- | --- |
| ***Visitor Name*** |  | ***Home Institution*** |  | ***Country*** |  |
| ***Email*** |  | ***Cell Phone*** |  | ***Arrival Date*** |  | ***Departure Date*** |  |

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| ***Visitor Name*** |  | ***Home Institution*** |  | ***Country*** |  |
| ***Email*** |  | ***Cell Phone*** |  | ***Arrival Date*** |  | ***Departure Date*** |  |

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| ***Visitor Name*** |  | ***Home Institution*** |  | ***Country*** |  |
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| ***Visitor Name*** |  | ***Home Institution*** |  | ***Country*** |  |
| ***Email*** |  | ***Cell Phone*** |  | ***Arrival Date*** |  | ***Departure Date*** |  |

**VISITOR INFORMATION**

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| ***Visitor Name*** |  | ***Home Institution*** |  | ***Country*** |  |
| ***Email*** |  | ***Cell Phone*** |  | ***Arrival Date*** |  | ***Departure Date*** |  |

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| ***Visitor Name*** |  | ***Home Institution*** |  | ***Country*** |  |
| ***Email*** |  | ***Cell Phone*** |  | ***Arrival Date*** |  | ***Departure Date*** |  |

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| ***Email*** |  | ***Cell Phone*** |  | ***Arrival Date*** |  | ***Departure Date*** |  |

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| ***Visitor Name*** |  | ***Home Institution*** |  | ***Country*** |  |
| ***Email*** |  | ***Cell Phone*** |  | ***Arrival Date*** |  | ***Departure Date*** |  |

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| ***Visitor Name*** |  | ***Home Institution*** |  | ***Country*** |  |
| ***Email*** |  | ***Cell Phone*** |  | ***Arrival Date*** |  | ***Departure Date*** |  |

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| ***Visitor Name*** |  | ***Home Institution*** |  | ***Country*** |  |
| ***Email*** |  | ***Cell Phone*** |  | ***Arrival Date*** |  | ***Departure Date*** |  |

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| ***Visitor Name*** |  | ***Home Institution*** |  | ***Country*** |  |
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| ***Visitor Name*** |  | ***Home Institution*** |  | ***Country*** |  |
| ***Email*** |  | ***Cell Phone*** |  | ***Arrival Date*** |  | ***Departure Date*** |  |

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| --- | --- | --- | --- | --- | --- |
| ***Visitor Name*** |  | ***Home Institution*** |  | ***Country*** |  |
| ***Email*** |  | ***Cell Phone*** |  | ***Arrival Date*** |  | ***Departure Date*** |  |