**BILATERAL TEACHING EXCHANGE PROGRAMME**

**Application Form - Inbound**

Completed application form should be submitted **to the chairman of the host department at CUHK** with the following documents:

* Letter of invitation from the CUHK host department/collaborator.
* The applicant’s Curriculum Vitae with publication records.
* Copy of notification of financial support for the proposed visit to CUHK (if any).

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| **1. Personal particulars** |
| Title (Mr./Ms./Dr./Prof.) & Name (Family Name/Given Name):  | Position: | Employment at Home Institution:❑ Full-time ❑ Part-time |
| Department/Unit/Faculty: | Name of Institution: |
| Work Address: | Email: | Contact Phone No: |
| Are you tenured?❑ Yes ❑ No [Please indicate the end date of the currentcontract (DD/MM/YY): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]Note: In the event that there is less than a year of employment in your current contract after the proposed visit, your application should be supported by the Department/Unit Head (or an appropriate higher authority) with specification of intention of contract renewal. Please complete Section 8 on P. 4. | Will you retire from your current employment within a year after the proposed visit?❑ Yes [Please indicate your retirement date (DD/MM/YY): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] ❑ No |
| Have you been accepted as a visiting scholar at CUHK during the proposed visit?❑ Yes (Please provide details including the visit period):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_❑ No | Please indicate if you have received an award from any of the following CUHK schemes in the past: |
| ❑ Inbound Research Mobility Scheme  | (AY:\_\_\_\_\_\_\_\_\_\_\_) |
| ❑ Bilateral Teaching Exchange Programme  | (AY:\_\_\_\_\_\_\_\_\_\_\_) |
| ❑ Short-term Faculty Exchange Programme  | (AY:\_\_\_\_\_\_\_\_\_\_\_) |
| **2. Visit details at CUHK** (Please attach a letter of invitation from the CUHK host department/collaborator.) |
| CUHK Host Department: | Exchange Partner (Name/Title/Position): | Proposed Visit Period (DD/MM/YY): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (The proposed exchange must be completed within 18 months from the first visit.) |
| Will you receive any financial support for the proposed visit?❑ Yes. Source:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Please attach supporting document, if any.) ❑ No |
| **This application is in support of** (Please check one of the boxes.)🞏 Existing collaboration (Please complete Section 3.)🞏 New collaboration (Please skip Section 3.) |
| **3. History of collaboration with CUHK** (Please list all previous and current collaboration with CUHK/the host collaborator including joint research, exchange activities, joint seminars/conferences, publications, etc. You may use a separate sheet if needed). |
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| **4. Please describe the course(s) to be taught at CUHK and related teaching activities.** |
| 1. Name of UGC-funded course(s) at CUHK and course level (undergraduate or research postgraduate):
2. Course(s) objectives, outline and related teaching activities:
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| **5. Please describe your research focus.** |
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| **6. Please describe your proposed activities at CUHK and highlight possible areas of collaboration.** |
| 1. Please provide a detailed plan of your undertaking with activities to be undertaken and people whom you will meet.
2. Please state the planned research collaboration, if any.
3. How will your undertaking enhance collaboration between CUHK and your home institution?
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| **7. Declaration by applicant** |
| I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name), declare that the statements made and information given in this application are, to the best of my knowledge, true, complete, and correct. I have read and fully understand the “Guidelines for Outbound and Inbound Applicants”. I understand that the personal data provided in this form will be used by the relevant committees and authorized personnel responsible for handling applications for the award. Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **8.** **Endorsement by home institution** |
| **Recommendation by Head of Home Department/Unit:** * 1. I support the application.

 ❑ Yes / ❑ No Please provide reasons:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* 1. I confirm the intention to renew the contract of the applicant so that he/she will be employed by the University within a year after the proposed visit. (Please complete if the applicant has less than a year of employment at the University in his/her current contract.)

 ❑ Yes / ❑ No / ❑ N/AName in Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Endorsement by CUHK (For internal use only)** |
| 1. **Recommendation by Department Academic Personnel Committee at CUHK:**

 Endorsement by Department Academic Personnel Committee: ❑ Support / ❑ Not Support Please provide reasons:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name in Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 1. **Recommendation by Faculty Academic Personnel Committee at CUHK:**

 Endorsement by Faculty Academic Personnel Committee: ❑ Support / ❑ Not Support Please provide reasons:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name in Print: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |