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| **Oxford logo** | **APPLICATION FORM**  **ACADEMIC VISITORS PROGRAMME**  **CENTRE FOR SOCIO-LEGAL STUDIES, UNIVERSITY OF OXFORD** | | |
|  | **PLEASE COMPLETE IN BLOCK CAPITALS** | | |
| **Title** | | **First Name** | **Surname** |
| **Status**  **(Academic/Doctoral Student)** | | **Post/Position (if applicable)** | |
| **Nationality** | | **Date of Birth** | **Gender** |
| **Address for Correspondence** | | | **Telephone**  **Fax**  **Email** |
| **Home Address** | | | **Emergency Contact Address**  **Telephone** |
| **Please supply proposed dates of Visit:** | | **From** | **To** |
| **Brief Description of Research Interests for Distribution to Members of the Centre**  **Give details of the two referees who have submitted references on your behalf:**  Reference 1  Name –  Position –  Email Address –  Telephone Number -  Reference 2  Name –  Position –  Email Address –  Telephone Number - | | | |
| **Please Note –**  **The Centre charges a fee to cover the costs of the Visitor’s Programme, which includes the cost of accommodation within the centre. Please note that we *cannot* guarantee your office space, and you may be placed within the open plan area of the Centre.**  **The monthly charges do not include the cost of telephone, fax, photocopying or postage charges.**  **Please tell us if you, or your family, have any special needs so that we can help/advise you in advance of your visit. Doctoral students are not eligible for offices.** | | | |
| **Have you applied for any funding for your visit?** | | | |
| **Additional Information** | | | |