

Oxford Centre for Hebrew and Jewish Studies

VISITING SCHOLAR APPLICATION FORM

Please write in capital letters throughout

Surname: Prof / Dr / Mr / Mrs / Ms / Miss

Forename(s):

University/Work address:

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Telephone No: Fax No:

E-mail address:

Home address:

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Telephone No: Fax No:

E-mail address:

* Please indicate your preferred e-mail & postal address: HOME or UNIVERSITY (delete as appropriate) *

Preferred dates: Arrival:

Departure:

(Please note these are preferred dates only and cannot be guaranteed)

Accommodation requirements:

- I bedroom apartment 2 bedroom apartment
- 2 bedroom cottage 3 bedroom cottage

Number of family members who will be residing with you for the duration of your stay:

Name of spouse/partner: No. of children:

Names and ages of children who will reside with you:

Name: Age: Male/Female

Name: Age: Male/Female

Name: Age: Male/Female

Signature: Date: