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| Cambridge/Canterbury Exchange Programme 2024-2025 |

**Application form for**

**Cambridge Fellowships at the University of Canterbury**

**(‘Cambridge Fellowship’)**



**Application for Cambridge Fellowship at the University of Canterbury**

Please refer to the accompanying ‘Information about Cambridge Fellowships at the University of Canterbury’, especially the regulations on pages 3-4.

1) Applicant to complete sections 1-31, in consultation with colleagues at University of

 Canterbury

2) Sections 32 and 33 to be completed by Head of relevant School/Department and by

Faculty Executive Dean at University of Canterbury

3) Applicant to forward the following:

* completed application form
* curriculum vitae and list of recent publications
* signed letter of support from Head of relevant Department/Faculty at University of Cambridge

to:

Strategic Partnerships Office

University of Cambridge, The Old Schools, Trinity Lane, Cambridge, CB2 1TT

strategicpartnerships@admin.cam.ac.uk

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|  |  | ***Please type requested information in this column.*** |
| **Personal Details** |
| 1. | Name and postal address of the applicant: *Please capitalise the surname.* | Academic address:Home address: |
| 2. | Email address:*Correspondence will be sent from the Erskine Programme to the email address provided.* |  |
| 3. | Date of birth:*This is required for insurance purposes.* |  |
| 4. | Gender: |  |
| 5. | Ethnicity: |  |
| 6. | Nationality: |  |
| 7. | Passport place of issue: |  |
| 8. | Present position: |  |
| 9. | Field of special interest and/or expertise: |  |
| **University of Canterbury Host Department Details** |
| 10. | School/Department(s) in which lectures are to be given to students: |  |
| 11. | Principal host name at the University of Canterbury: |  |
| 12.  | Name(s) of the staff members who will be interacting directly with the Fellow: |  |
| **Teaching Details** |
| ***Please note that an average of at least 3 lectures per week (or equivalent student contact hours) is required for the full duration of the fellowship. This may include tutorials, labs, workshops, public lectures or seminars, and active teaching hours on field trips, but not office hours or marking.*** |
| 13. | Please provide details of the:1. Course Code(s)
2. Expected number of students on each course
3. Topics to be covered in the lectures
4. Number of lectures to be given (and approximate dates, where possible)
5. Length of lectures
 |  |
| 14. | Block courses:If the course is to be taught as a block, please provide details of the number of teaching days and hours to be taught: |  |
| 15. | Assessment: Will the visitor be responsible for assessing any course assignments and/or marking end of term tests or examinations?If so, please indicate how students will be supported if the Cambridge Fellow departs before the last of the assessment(s) is conducted.If not, please name the Canterbury staff member who will be responsible for marking any assessments emerging from material covered by the Cambridge Fellow in their absence. |  |
| 16. | Please provide details of other teaching related activities e.g., seminars, public lectures, field trips, post-graduate research which will be undertaken during the visit:*Details can be provided on a separate sheet if appropriate.*  |  |
| **Fellowship Details** |
| 17. | Suggested length of visit (in days, excluding day of departure):*Accommodation and utilities will be arranged and paid for by the Erskine Programme for the duration of the Fellowship. Any additional rental (e.g., if the Cambridge Fellow is staying on in NZ after the fellowship end date) will be charged directly to the Cambridge Fellow.* | Number of days: From: To:Year: |
| 18. | If the proposed length of visit is greater than 3 months (90 days) please describe in detail why you are requesting a longer visit: |  |
| 19.  | Do you intend to be in New Zealand for a total of more than 183 days (either for your fellowship or in another capacity)? If so, you may need to register as a New Zealand tax resident – please contact the Erskine Programme Coordinator for further information. |  |
| 20. | Will you be in New Zealand pre/post Fellowship for an extended period of time? If so, please provide details of planned activities pre/post Fellowship: |  |
| 21. | Have you been the recipient of a previous Cambridge Fellowship (or other Fellowship awarded via the Erskine Programme Office)? If so, when?*Please list the dates of any previous visits.* |  |
| 22. | If you have been the recipient of a Visiting Fellowship awarded by the Erskine Programme Office, why do you wish to visit Canterbury again? (Canterbury: please detail any attempts made to find a Visiting Fellow who is new to Canterbury.) |  |
| 23. | Canterbury: if the visitor has not been the recipient of a previous Cambridge Fellowship (or other Fellowship awarded via the Erskine Programme Office) what checks have been undertaken to assess the suitability of the candidate to teach at Canterbury? Is the visitor known to an existing Canterbury staff member? If so, how? |  |
| 24. | Proposed number of family members to travel with you: |  |
| 25. | If you will be travelling with children, please state their age(s): |  |
| 26. | Maintenance allowance sought:*Please note that unless a special case is made and approved, the maintenance allowance is payable only for the period spent at the University of Canterbury during the teaching term (i.e., non-term time is excluded). Canterbury: if your visitor will be engaged in teaching duties during the break, please provide a detailed description of the activities to be undertaken (see Regulation No 2). If this information is not provided, the visitor will not be paid a maintenance allowance outside of term time.* |  …. nights @ NZ$100 per night = NZ$ … |
| 27.  | State the number of days (if any) of projected work during non-term time and the activities to be undertaken: |  |
| 28. | Dates of any annual leave, as approved by the Cambridge Head of Department/Faculty, being taken during any part of the above period: |  |
| 29. | *Office use only: The Erskine Programme Office will obtain a quote from the University’s travel agency Orbit Travel in due course if the application is approved.**Cost of travel for the period of the Fellowship:* *\* Number of airfares for which the visitor is eligible (see Regulation 3)*  | NZ$ x [1] or [2] \* = NZ$ |
| 30. | Please give details of financial assistance from other sources that has already been awarded or is likely to be awarded: |  |
| **Signatures and Approvals** |
| 31. | **Signature of applicant****Date:** | …………………………………………………….. |
| *Applicant seeks approval from University of Canterbury School/Department and Faculty.* |
| **University of Canterbury: School/Department & Faculty Approvals** |
| 32.  | **Head of School/Department, University of Canterbury** |
| a. | Whom did you consult about this application and what form did the consultation take? |  |
| b. | Comment: |  |
| c. | **Name****Signature:****Head of School/Department** **Date:** | **…………………………………………………****of** **at University of Canterbury** |
| 33. | **Faculty Executive Dean, University of Canterbury** |
| a. | Comment: |  |
| b. | **Name****Signature:****Head of School/Department** **Date:** | **…………………………………………………****of** **at University of Canterbury** |
| *Applicant: Please forward completed application to the University of Cambridge Strategic Partnerships Office for shortlisting.* |
| **University of Cambridge: Pro-Vice-Chancellor for Research and International Partnerships Approval** |
| 34. | **Pro-Vice-Chancellor for Research and International Relations** |
| a. | Comment: |  |
| b. | **Name:****Signature:****Pro-Vice Chancellor****Date:** | **…………………………………………………****at University of Cambridge** |
| *Shortlisted applications are referred to the University of Canterbury for final selection.* |
| **University of Canterbury: Deputy Vice Chancellor Academic Approval** |
| 35. | **Deputy Vice-Chancellor Academic** |
| a | Comment: |  |
| b. | Approved or declinedSignature:Date: | **…………………………………………………..** |

*Updated April 2024*