International Faculty & Scholars

PRELIMINARY EVALUATION SHEET

CCHO	IAD	INIEO	DIVIV	TION:
SURU	LAR	HMEO	RIVIA	

Family Name:				First:				Middle:						
Email Address: Phone				ne (home):			Dhono (office)							
Email Address: Phone (ne (no	iome): P			FIIOIIE	Phone (office):				
Home Address:							City & Sta	City & State:			Zip Code:			
Office Address:							City & Sta	City & State:			Zip Code:			
Date of Birth (mm/dd/yy):	City/Vil	/Village/Town of Birth: Sta			State	e/Provinc	ce of Birth: Birth Cour				Citizenship:			
Social Security Number (U.S	.):				A	A# (if applicable):								
SCHOLAR QUALIFICATIONS:												Yes	No	
Internationally Recognized?		Yes No				hins Regu	os Requiring Oustanding Achievement			ents?		163	NO	
3 Years post-PhD Experienc							Waterial about YOUR work?							
· · · · · · · · · · · · · · · · · · ·				rticipation as Judge of Others Work?										
Research?						cientific Contributions? (6-10 expert letters)								
Major Prizes/Awards? (i.e N								?						
EMPLOYMEN1	INFO	RMAT	ION:							1				
Full UA Working Title:							Full-Time or Part-Time: Annua			Annual	l Salary:			
						6 11	/c							
Department:						Colle	ge/School:							
IMMIGRATION	N INFO	RMAT	ION:											
Current Status: If H status				us, approval dates? First H			H appro	val (mm/	dd/yyyy)?					
The state of approver access							- ' '	, ,	, , , , , , ,					
Date of Arrival:						1-94	Number:							
I certify that the above information provided on this form is true and correct.														
Name Sig				Sign	ature				Dat	e				