

AUTHORIZATION TO APPOINT A GUEST STUDENT

Student Name:Student Address:				
Student Email: Affiliation/Home Inst: WHOI Department:				
	Type of	Action		
□ New Appointment	□ Reappointment		☐ Extension of Appointment	
Appointment Dates Arr	rival:		Departure:	_
WHOI office location:	MS#:		WHOI extension:	
Is the student a foreign nat	ional? □ No □ Yes (if YES	, contact t	he Foreign National Advisor ASAP)	
	Stipend/Housing Allow	ance/Trav	vel Allowance	
Will a stipend, housing allo Financial Assistance Award			offered? No Yes (if YES, submit	<u>[</u>
Please specify	Amount	PI to Pay	Project Number	Student to Pay
Stipend (not to exceed WHOI per diem)				-
Travel				
WHOI Housing (contact housing@whoi.edu ASAP)				
Non-WHOI housing				
ment approval, forward comp	oleted authorization form wi	th attachm S #31) if stu	penefits to the Guest Student. After deents to Foreign National Advisor (MS # udent is a US citizen or permanent resides	15) if
Sponsor Name		Sponso	r Signature	
Department Chair/Administrator	Date	Foreign	National Advisor (if guest is foreign nat'l)	Date
		Registra	ar/Grad & Undergrad Admin.	Date