

AFFILIATE REQUEST APPOINTMENT AND RENEWAL FORM

Requesting Department: _____

Home Department at UC San Diego: _____

Initial Appointment or Renewal Current End Date if Renewal: _____

If this individual is not appointed at UC San Diego, are they currently appointed at an institution that has an affiliation agreement with UC San Diego?

Yes Select from List _____

No

Required Attachments:

Current CV or BioBib Attached

If the answer to the above question is no, this is an exception. Please also attach:

Exception request memo *or* Affiliation confirmation (if not listed above)

Signed Oath and Patent

Personal Data Form

Optional Attachments:

Description of Department Process

Requested Start Date: _____ Requested End Date (max 5 years): _____

Explanation of the proposed activities (you may add additional pages if needed):

Approved _____
Department Chair Name: _____ Date _____

Endorsed _____
Albert P. Pisano, Professor and Dean Date _____

Not Endorsed (see attached explanation)