

**Visiting Scholar Personal Interest Form  
Western Carolina University  
Office of International Programs & Services**

Date: \_\_\_\_\_

Male

Female

Name: \_\_\_\_\_  
(First) (Middle) (Last)

International Scholar From \_\_\_\_\_  
(City & Country)

Position, title or occupation in home country \_\_\_\_\_

Name and address of institution, agency or organization that you are affiliated within your home country?  
\_\_\_\_\_  
\_\_\_\_\_

To be accompanied by family?

NO

YES - if Yes, how many accompanying dependents? \_\_\_\_\_

Duration of Stay at WCU From (month) \_\_\_\_\_ (day) \_\_\_\_\_ (Year)

To (month) \_\_\_\_\_ (day) \_\_\_\_\_ (Year)

What do you plan to have as your primary activity at WCU?

Observe classes

Research

Other

What is your academic area of interest? \_\_\_\_\_

To which department at WCU are you applying? \_\_\_\_\_