**Internationalisation Activity Information**

This document must be completed and submitted by all staff members who are participating in international activities for work or work-related purposes. The completed form should be emailed to [lesegok@vut.ac.za](mailto:lesegok@vut.ac.za) for record keeping and Internationalisation reporting.

**SECTION 1** *(Compulsory)*

|  |  |
| --- | --- |
| **Date of Request** | Click or tap to enter a date. |
| Employee  Student  Other: (please specify) | |
| **Name, surname & Title:** | Click or tap here to enter text. |
| **Faculty:**  **Department:** | Research & Internationalisation  Click or tap here to enter text. |
| **Contact Number(s):** |  |
| **Email:** | Click or tap here to enter text. |
| **Activity:** | 1: Mandated or required meeting attendance.  2: Association Involvement  3: Event Attendance i.e. conference, seminar, etc.  4: Other professional development and enrichment  5: Co-publications/co-inventions  6: Joint research proposals  7: Post-doctoral fellowship  8: Collaborative or partnership degrees/qualifications  9: Joint higher degree supervision  10: Visiting scholar (Inbound or Outbound) *Please select*  11: Other    If other, please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Hosting of event** | **Online** **In-person**  **If other, please specify:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**SECTION B** *(Compulsory)*

|  |  |
| --- | --- |
| **Name of activity**  Click or tap here to enter text. | |
| **Description of activity**  Visit Universities and collaborate on research and faculty of applied and computer sciences courses (agriculture) | |
| **Date/s (if applicable):** | Click or tap to enter a date. |
| **State the purpose of the activity and explain the input you will be having on this activity:**  Click or tap here to enter text. | |
| **State the expected output of this activity and what advantages will it have for the institution.**  Click or tap here to enter text. | |
| Will a report be submitted on the activity? | Yes No |

**SECTION C** *(Compulsory)*

|  |  |
| --- | --- |
| Does the event require funding? | Yes  No |
| If yes, please specify details and costs, e.g. travel, conference fee, accommodation, etc. E.g. total cost: R 60, 000.00 |  |
| Activity funded by | Self Department/Faculty Other  If other specify e.g. host institute, NRF, etc. |

**SECTION D**

|  |  |
| --- | --- |
| **Is travelling required?** | Yes  No |
| **If yes, travel destination & venue** | Click or tap here to enter text. |
| **Travel Dates** | Click or tap to enter a date. |

|  |
| --- |
| **Signatures:**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Requester  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Line Manager or approval attached  **Condition:**  Please note that this form is for record keeping at the Internationalisation Office. The Internationalization Office has no influence on the approval of your application. A report on the travel purpose will be appreciated upon your return to support future traveling. A copy of the report is to be submitted to Ms Lesego Kgaswe for records keeping at the Internationalisation Office with [lesegok@vut.ac.za](mailto:lesegok@vut.ac.za) |
|  |