Immersive Visitor Training

Programme Application

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| Applicant Information | | | | | | | | |
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| **Applicant Name:** | | |  | |  | |  | |
|  | | | *Last* | | *First* | |  | |
|  | | |  | |  | |  | |
| **Affiliation:** | | |  | |  | |  | |
|  | | | *Department* | | *Institute* | | *Country* | |
|  | | |  | |  | |  | |
| **Proposed Dates of Visit:** | | |  | |  | |  | |
|  | | | *From* | | *To* | |  | |
|  | | |  | |  | |  | |
| **Language of training:** English | | | | | | | | |
| **Please describe your knowledge of the language** (reading, writing, oral) **and list any certifications** | | | | | | | | |
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| Aims and Objectives | | | | | | | | |
| **Please provide a description of the overall aim of your visit:** | | | | | | | | |
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| **Please provide specific objectives for your visit:** | | | | | | | | |
|  | | | | | | | | |
| **1.** |  | | | | | | | |
| **2.** |  | | | | | | | |
| **3.** |  | | | | | | | |
| **4.** |  | | | | | | | |
| **5.** |  | | | | | | | |
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| Activities and Programme | | | | | | | | |
| **List the activities to be undertaken:** | | | | | | | | |
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| **Provide a programme for the visit where possible:** | | | | | | | | |
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| EI Host | | | | | | | | |
| **Please list any group leaders or personnel from EI whom you have identified as sharing areas of interest and/or possessing the relevant expertise for the training you have requested:** | | | | | | | | |
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| Expected Outcomes from the visit | | | | | | | | |
| **What knowledge do you expect to gain from your visit programme?** | | | | | | | | |
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| Previous Experience | | | | | | | | |
| **What types of databases have you used before?** | | | | | | | | |
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| **For what purposes were they used?** | | | | | | | | |
|  | | | | | | | | |
| **Have you ever opened a terminal, e.g. using the** *ls* **command?** | | | | | | | | |
| Yes | | | No | | Frequent user of linux/unix | | | |
|  | | |  | |  | |  | |
| **Do you have any experience with R?** | | | | | | | | |
| Yes | | | No | |  | |  | |
|  | | |  | |  | |  | |
| **If yes, what did you use it for?** | | | | | | | | |
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|  | | |  | |  | |  | |
| **Do you have any experience with Python?** | | | | | | | | |
| Yes | | | No | |  | |  | |
|  | | |  | |  | |  | |
| **If yes, what did you use it for?** | | | | | | | | |
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| **What are the three main biological research questions that you would like to gain experience in order to be able to answer?** | | | | | | | | |
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| **1.** | |  | | | | | |
| **2.** | |  | | | | | |
| **3.** | |  | | | | | |
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| **What are the main types of skills/techniques that you are hoping to gain during your time at EI?** | | | | | | | | |
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| **What types of data will you be working with? How much data? Which model organisms?** | | | | | | | | |
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| Teaching Opportunities | | | | | | | | |
| **Do you have any teaching duties?** | | | | | | | | |
| Yes | | | No | |  | |  | |
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| **If yes, what do you teach and at what level?** | | | | | | | | |
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| **If you have teaching duties, would you be willing to use some of your skills in training opportunities at EI during your visit?** | | | | | | | | |
| Yes | | | No | |  | |  | |
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| Declaration | | | | | | | | |
| **Please check this box to confirm that you have funding available to cover your travel, accommodation and subsistence** | | | | | | | | |
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| **Please check to confirm that you have funds available to cover the costs of relevant training courses and visits whilst at EI** | | | | | | | | |
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| **Do you require a letter of invitation?** | | | | | | | | |
| Yes | | | No | |  | |  | |
| **If yes, please provide a draft letter with information to be included in conjunction with submission of this application, and specify any deadline** | | | | | | | | |
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| The information supplied in this form will be shared with relevant personnel within the Earlham Institute for the purposes of correctly identifying suitable hosts for your visit, and for discussing technical content and knowledge. Information will also be used for the purposes of recording geographical locations of applicants, career profile and visit durations, reported periodically as a collective, to our funding agencies and governing bodies, as appropriate. For further information, please see our [data privacy policies](http://www.earlham.ac.uk/cookies-and-privacy). | | | | | | | | |
|  | | | | |  | |  | |
| I have read and understood the privacy policy and confirm that I am happy for my information to be shared in this way. | | | | | | | Yes | |
|  | | | | |  | |  | |
| ***Signature Date*** | | | | | | | | |

Once you have completed the form, please return it to:

Dr Emily Angiolini

Head of Training

email: [emilyj.angiolini@earlham.ac.uk](mailto:emilyj.angiolini@earlham.ac.uk)

cc: [ivtp@earlham.ac.uk](mailto:ivtp@earlham.ac.uk)