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# Application

## Webster University Worldwide Faculty Mobility Program (International Campus Faculty TO International Campuses)

Name \_\_\_\_\_ Date \_\_\_\_\_

School/College \_\_\_\_\_

Department \_\_\_\_\_

Home Campus Site \_\_\_\_\_ E-mail \_\_\_\_\_

Targeted Host Campus Site \_\_\_\_\_

Term(s):

Summer 20\_\_\_\_  Fall I 20\_\_\_\_  Fall II 20\_\_\_\_

Spring I 20\_\_\_\_  Spring II 20\_\_\_\_

Teaching Areas: Courses, Subject Area  
(Please use separate page.)

Service to Host Campus  
(Please use separate page.)

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Approval Signatures:

Home Campus Director \_\_\_\_\_ Date \_\_\_\_\_

Host Campus Director \_\_\_\_\_ Date \_\_\_\_\_

Dean \_\_\_\_\_ Date \_\_\_\_\_

VP for Academic Affairs \_\_\_\_\_ Date \_\_\_\_\_