



# HARVARD DIVINITY SCHOOL

Data Form for HDS Visiting Scholars, CSWR Visiting Scholars, and Postdoctoral Fellows (including Researchers with Outside Funding)

*Please contact Matthew B. Turner, Department Administrator, Office of Academic Affairs, with any questions regarding this form.*

### Required Information:

Surname (Family Name):  Given (First) Name:

Middle Name:  Date of Birth:  Social Security Number:

Preferred Email:  U.S. Citizenship Data:

### Permanent Contact Information:

Address:  City:

State/Province:  Country:  Postal Code:

### Local Contact Information (if known):

Address:  City:

State/Province:  Postal Code:  Telephone:

Highest Degree Received:  Degree Granting Institution:

Date Degree Granted:

Have you been appointed previously at Harvard?  Previous Department:

HUID# (if known):

### Voluntary Disclosure:

Harvard University is subject to certain nondiscrimination and affirmative action record-keeper and reporting requirements which require the University to invite appointees to voluntarily self-identify their gender, race/ethnicity, and veteran status. Answers to these questions are voluntary, but appreciated.

Gender:  Race/ethnicity:

Veteran Status:

*Visitors requiring a visa to visit Harvard Divinity School should proceed to page 2.*



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**Additional Requirements for Participants in the J-1 Visa Exchange Visitor Program:**

To be eligible for the J-1 visa an individual must meet the following criteria:

- must have a temporary academic appointment at Harvard University such as a postdoctoral/research fellow, or a faculty member.
- must have adequate financial support for all living expenses, including additional financial support for any accompanying family members either from Harvard or any other sources.
- must maintain health insurance which covers for sicknesses or accidents during the period of time when they are in J status. Failure to maintain health insurance coverage may jeopardize a J visa holder's status.

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**Health Insurance:**

Please list and/or explain your health care coverage during your appointment at Harvard Divinity School:

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**Funding Source:**

Please identify the source(s) of funding support during your appointment at Harvard Divinity School (i.e. sabbatical/home institution; research leave/home institution; outside source (e.g. Fulbright); personal funds):