

## AFFILIATION FORM for Visiting Professors and Visiting Researchers hosted at the University of Verona

In the knowledge that the University of Verona (hereinafter referred to also as "UNIVR") is committed to and active in disseminating a broad awareness of the presence and research activities of Visiting Professors, Visiting Researchers and the other scholars it hosts, I, the undersigned, agree to the following:

- 1. During my research period at UNIVR, I commit to:
  - carry out the teaching and/or research activities agreed upon with the Department/School of .....;
  - increase awareness of UNIVR among my academic colleagues and professional contacts and include mention of it when publishing the results of the research I conduct, in whole or in part, at UNIVR, even after the conclusion of my visiting research period. In particular, if I hold a position at another research institution or have a dual appointment, I am aware that I should indicate both affiliations in publications associated with the work carried out during my research period at UNIVR.

When indicating my affiliation with UNIVR, I am aware that the official Italian name of the institution is to be used: "Università degli Studi di Verona".

- 2. During my stay at UNIVR, I am aware that I am entitled to:
  - a workplace at the Host Department/School;
  - access to university computer facilities;
  - access to university libraries;
  - information and support regarding the procedure for obtaining my Italian permit of stay;
  - information and support in my search for suitable accommodation in Verona;
  - insurance coverage within the limits of the law and the university insurance policies;
  - ESU card to access the university canteens managed by "ESU Verona";

I hereby also authorize the University of Verona to publish my contact details (i.e., name, surname and email address) on its official website.

The Visiting Professor/Researcher	The Head of the Department/School of
Date	Date
Signature	Signature