

**Application form Flying Faculty for 2018**

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| **Name of Dean** |  |
| **Name of School** |  |
| **Name of Exchange Coordinator** |  |
| Rationale for FF request |  |
| 1. What special   Topic will be taught by  the FF?   1. How are the FF integrated   in the curriculum? |  |
|  | |
| **FF Request 1** | PLEASE PRIORITIZE YOUR REQUESTS |
| **Name of Department** |  |
| Name and title FF |  |
| Home university |  |
| Position at the home university |  |
| Field of specialization |  |
| To teach students in which year? |  |
| Estimated no. of teaching hours |  |
| Language of instruction |  |
| Former stays at GJU? |  |
| E-mail address |  |
| Planned period of stay | From: dd/mm/yyyy To: dd/mm/yyyy |
| Duration of planned stay | (Number of days or weeks) |
|  | |
| **FF Request 2** |  |
| **Name of Department** |  |
| Name and title FF |  |
| Home university |  |
| Position at the home university |  |
| Field of specialization |  |
| To teach students in which year? |  |
| Estimated no. of teaching hours |  |
| Language of instruction |  |
| Former stays at GJU? |  |
| E-mail address |  |
| Planned period of stay | From: dd/mm/yyyy To: dd/mm/yyyy |
| Duration of planned stay | (Number of days or weeks) |
|  | |
| **FF Request 3** |  |
| **Name of Department** |  |
| Name and title FF |  |
| Home university |  |
| Position at the home university |  |
| Field of specialization |  |
| To teach students in which year? |  |
| Estimated no. of teaching hours |  |
| Language of instruction |  |
| Former stays at GJU? |  |
| E-mail address |  |
| Planned period of stay | From: dd/mm/yyyy To: dd/mm/yyyy |
| Duration of planned stay | (Number of days or weeks) |
|  | |
| **FF Request 4** |  |
| **Name of Department** |  |
| Name and title FF |  |
| Home university |  |
| Position at the home university |  |
| Field of specialization |  |
| To teach students in which year? |  |
| Estimated no. of teaching hours |  |
| Language of instruction |  |
| Former stays at GJU? |  |
| E-mail address |  |
| Planned period of stay | From: dd/mm/yyyy To: dd/mm/yyyy |
| Duration of planned stay | (Number of days or weeks) |
|  | |
| **FF Request 5** |  |
| **Name of Department** |  |
| Name and title FF |  |
| Home university |  |
| Position at the home university |  |
| Field of specialization |  |
| To teach students in which year? |  |
| Estimated no. of teaching hours |  |
| Language of instruction |  |
| Former stays at GJU? |  |
| E-mail address |  |
| Planned period of stay | From: dd/mm/yyyy To: dd/mm/yyyy |
| Duration of planned stay | (Number of days or weeks) |
|  | |
| **FF Request 6** |  |
| **Name of Department** |  |
| Name and title FF |  |
| Home university |  |
| Position at the home university |  |
| Field of specialization |  |
| To teach students in which year? |  |
| Estimated no. of teaching hours |  |
| Language of instruction |  |
| Former stays at GJU? |  |
| E-mail address |  |
| Planned period of stay | From: dd/mm/yyyy To: dd/mm/yyyy |
| Duration of planned stay | (Number of days or weeks) |

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| **Date/signature/stamp**  **Exchange Coordinator** |  |
| **Date/signature/stamp**  **Dean of School** |  |

**Please send the completed document signed and stamped by the Dean and the**

**Exchange Coordinator of the Department as Hard Copy and as E-Mail to the IO to:**

**Ms. Jacqueline Rogler**

Deputy Director

E-Mail: [Jacqueline.Rogler@gju.edu.jo](mailto:Jacqueline.Rogler@gju.edu.jo)

Phone: 06 429 4896

Room: B117