**EXTENSION FORM FOR VISITORS**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **First name:** |  | | | | | | | | | | | |
| **Last name:** |  | | | | | | | | | | | |
| **Preferred name:** |  | | | | | | | | | | | |
| **CRSid:** |  | | | | | | | | | | | |
| **New end date:** |  | | | | | | | | | | | |
| Confirm that the visitors` employment/course/fellowship details are the same as per original Request to Invite form | | | | | Yes | No (provide new details): | | | | | | |
|  |  | | | | | | |
| **Bench fee:** | | | | Yes | | | | | | No | | |
| If yes, give details: | | Per month | | | | | £ | | | | |  |
| Total/One off payment | | | | | £ | | | | |  |
| Job Number nominated to receive 50% share of bench fee | | | | | | | |  | | | | |
| Method of Payment  (tick or highlight one) | | | In Person | | | | | | | |  | |
| Invoice | | | | | | | |  | |
| Internal Transfer | | | | | | | | Job number: | |
| **Admin fee Job number:**  (applies only for GAE visa extensions and embedded researchers` extension) | | | | | | | | |  | | | |
| **Head of the Division approval/signature:** | | |  | | | | | | | | | |
| **Date:** | | |  | | | | | | | | | |