

Visitor ID Application Form

This form is to be used when requesting a Visitor ID Card for:

- Adjunct Appointees,
- Visiting Academics/Researchers from other Institutions/Companies.

Note: If the visitor only requires access to email/computer resources and does not require a physical Visitor ID access card an external account should be requested from ISS. For details visit:

ISS External Account Information

Visitor ID cards are only issued for visits exceeding three months. The following documents must be submitted with this form to <a href="https://https

- A passport style ID photo
- Formal confirmation of visiting appointment i.e. University of Galway appointment letter or relevant Agreement document with University of Galway e.g. Sponsored Research Agreement
- Visitors from other companies or institutions must submit a letter from their Company, stating that their Company will provide insurance cover while on campus

This form is not applicable for visiting students/interns. All students (including temporary visiting students from other institutions) requiring access must be recorded in the University of Galway Student Registration system.

| Part 1 : Visitor Details | | |
|--------------------------------|------------------------------------|--|
| | | |
| orename: | Surname: | |
| elephone: | Date of Birth: | |
| Email: | | |
| | | |
| | | |
| | | |
| Part 2: Visiting Academic/Rese | archer Institution/Company Details | |
| | | |
| nstitution/Company | | |
| Name: | | |
| Address: | | |
| | | |
| ine Manager Name: | | |
| ine Manager Email address: | | |
| ine Manager phone number: | | |

| Part 3: Visit Details | |
|--|---|
| Visit Start Date: | Visit End Date: |
| Place of visit on campus: | |
| Purpose of Visit: | |
| | |
| | |
| Direct Supervisor on Campus: | |
| | |
| Part 4: Declaration/Approval | |
| | |
| I agree to fully adhere to University policies and | procedures while on University of Galway campus. |
| Policies and procedures can be found online her | e: |
| https://www.universityofgalway.ie/governance/ | academic-policies-procedures-forms/policies-procedures/ |
| | |
| | |
| Signed:(Applicant signature) | Date: |
| (Applicant Signature) | |
| Approved by: | |
| | |
| Signed:(Head of School Unit) | Date: |