For detailed instructions on completing this form, please [use this link](https://regionalservices.berkeley.edu/sites/default/files/postdoc-request-form-instructions.pdf).

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| **CANDIDATE INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Name: (Last, First):** Click here. | | | | | | | | | | | | | | | | **Department:** Click here. | | | | | | | | | | | | | | |
| **Email:** Click here. | | | | | | | | | | | | | | | | **Supervisor/PI:** Click here. | | | | | | | | | | | | | | |
| **Visa Type:** | | Choose item. | | | | | | | Visa Not Required | | | | | | | **Visa Status:** Click here. | | | | | | | | | | | | | | |
| **Ph.D. Conferral Date:** MM/DD/YYYY | | | | | | | | | | | | | | | | **Ph.D. Institution:** Click here. | | | | | | | | | | | | | | |
| **Previous Post-Ph.D. Research Experience:** (in months) | | | | | | | | | | | | | | | | **Position Number:** Click here. | | | | | | | | | | | | | | |
| **Direct Transfer from UC/LBNL:** | | | | | | | | Choose an item. | | | | | **If yes, Postdoc Hire date at other UC/LBNL:** MM/DD/YYYY | | | | | | | | | | | | | | | | | |
| REQUESTED ACTION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | **Current CV** | | **VSPA Gateway Application** | | | | | **Proof of PhD1** | | **Memo of Support** | | | | **Funding Information** | | | | **Signed Review** | | |  | | | | | | |
| Initial | | | | X | | X | | | | | X | |  | | | |  | | | |  | | | *1Accepted documentation for proof of PhD: (1) Copy of certificate, or (2) Verification from home institution’s Graduate Division or Registrar that requirements have been met with an anticipated date of degree conferral.* | | | | | | |
| Extension | | | | X | | X | | | | |  | |  | | | |  | | | | X | | |
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| Title Change | | | |  | | X | | | | |  | |  | | | | X | | | |  | | |
| Transfer | | | | X | | X | | | | | X | |  | | | |  | | | |  | | |
| TITLE & SALARY INFORMATION\* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Title:** Postdoctoral Scholar – Choose item. | | | | | | | | | | | | **Type:** Choose item. | | | | | | | **FTE:** Click here. % | | | | | | | | | | |
| **Level:** Choose item. | | | | | **Start Date:** MM/DD/YYYY | | | | | | | **End Date:** MM/DD/YYYY | | | | | | | **Auto-End Job:** | | | | | | **Annual Salary:** $##,###.## | | | | | |
| **Level:** Choose item. | | | | | **Start Date:** MM/DD/YYYY | | | | | | | **End Date:** MM/DD/YYYY | | | | | | | **Auto-End Job:** | | | | | | **Annual Salary:** $##,###.## | | | | | |
| *TITLE & SALARY INFORMATION – (IF NEEDED)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Title:** Postdoctoral Scholar – Choose item. | | | | | | | | | | | | **Type:** Choose item. | | | | | | | **FTE:** Click here.% | | | | | | | | | | |
| **Level:** Choose item. | | | | | **Start Date:** MM/DD/YYYY | | | | | | | **End Date:** MM/DD/YYYY | | | | | | | **Auto-End Job:** | | | | | | **Annual Salary:** $##,###.## | | | | | |
| **Level:** Choose item. | | | | | **Start Date:** MM/DD/YYYY | | | | | | | **End Date:** MM/DD/YYYY | | | | | | | **Auto-End Job:** | | | | | | **Annual Salary:** $##,###.## | | | | | |
| **WORK LOCATION** | | | | | | | | | | | | | | **ANNIVERSARY DATE** | | | | | | | | | | | | | | | | |
| Building, Floor, & Room | | | | | | | | | | | | | | Month Day (ex. January 5) | | | | | | | | | | | | | | | | |
| RESEARCH DUTIES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Click here | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NOTES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Click here | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FUNDING INFORMATION\* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **\*Please Note: Future rates might increase from the originally stated salary.** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **E-Verify** | **FTE %** | | **Agency** | | | | | | | **Agency Type** | | | | | **GLBU** | | | **Fund** | | | | **Org/Dept.** | **Program** | | | **Chartfield 1** | | | **Chartfield 2** | |
|  | ###% | | Click here. | | | | | | | Choose | | | | | Choose | | | Click here. | | | | Click here. | Click here. | | | Click here. | | | Click here. | |
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| Chartstring for Visa Fees: Click or tap here to enter text. | | | | | | | | | | | | | | | Fed-Ex Speed Type: Click or tap here to enter text. | | | | | | | | | | | | | | | |
| APPROVALS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Attach email approval if needed in lieu of signature approval below | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Preparer:** | | | | | | | Click here. | | | | | | | | | | **Signature:** | | |  | | | | | | | **Date:** | MM/DD/YYYY | | |
| **Fund Officer Name:** | | | | | | | Click here. | | | | | | | | | | **Signature:** | | |  | | | | | | | **Date:** | MM/DD/YYYY | | |
| **Faculty Sponsor Name:** | | | | | | | Click here. | | | | | | | | | | **Signature:** | | |  | | | | | | | **Date:** | MM/DD/YYYY | | |
| **Department/Unit Name:** | | | | | | | Click here. | | | | | | | | | | **Signature:** | | |  | | | | | | | **Date:** | MM/DD/YYYY | | |
| **Dean/ VC Name:** | | | | | | | Click here. | | | | | | | | | | **Signature:** | | |  | | | | | | | **Date:** | MM/DD/YYYY | | |