## **CENTER FOR LATIN AMERICAN STUDIES**

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## **TINKER VISITING PROFESSOR NOMINATION FORM**

Name of Nominee:		
Address:		
Telephone:		
Fax:	(Office)	_(Other)
Email Address:		
Institution and Yea	ar of Higher Degree:	
Field of Study:		
Name of Nominat	or:	
Department:		
Email Address:		
Telephone:	(Office)	(Other)
Please submit app	olication materials via email, fax, or ID mail to:	
	Elizabeth Sáenz-Ackermann, Associate Director esaenz@stanford.edu 582 Alvarado Row, MC: 8545 Fax: (650) 723-9822	
Application deadli	ne: February 2, 2015 for the 2015-2016 academic ye	ar.