## International Services Office • University of Rochester

100 Celebration Drive, Suite 100, Box 270446, Rochester, NY 14627 • Phone: +1 (585) 275-2866 Fax: +1 (585) 244-4503 • Email: scholars@iso.rochester.edu • Web: www.iso.rochester.edu

# New/Transfer-in J-1 Scholar Request for DS-2019 EXCHANGE VISITOR Checklist and Questionnaire

#### STEP 1

Complete the J-1 Scholar Exchange Visitor Questionnaire (next page). Please provide an original signature; do not type name on signature line.

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Along with a completed questionnaire, the following are required of the J-1 applicant:

A photograph of the J-1 applicant with name printed on the back of the photograph(s) (for UR immigration file, not the Dep of State)
Copy of identity pages of a valid passport for J-1 applicant
Current curriculum vitae
☐ Proof of permanent residency if applicant is a citizen of one country but legal permanent resident of another
☐ Copies of degrees and certificates earned
People who are not going to be paid by the University of Rochester MUST provide proof of funding and it must be:
Written in English
On letterhead from the funding source
<ul> <li>Signed by someone with the authority to dispense the funds from the funding organization</li> </ul>
Include the specific dates of funding coverage
Include amount of funding in US dollars
☐ If transferring to the University of Rochester, provide copies of:
Current DS-2019

### STEP 3

Current J-1 visa stamp

Submit questionnaire and other required documentation to the host department at the University of Rochester. The host department will then forward the packet to the ISO. Please note, the ISO cannot begin to process a request for a form DS-2019 if any of the above items are missing.



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## J-1 Scholar Exchange Visitor Questionnaire

surno	ame or family name as on passport/birth reg	g. given name	middle name	
Gender	Male Female			
Name of Uni	versity of Rochester Department where	e you will be an Exchange Visitor:		
Marital statu	s: Married Engaged	Not Married		
Date and pla	ce of birth:	city state or province	country	
Country of c	itizenship:			
Country of le	egal permanent residence if other than	country of citizenship (provide proof):		
assport # _		Passport Expiration Date:		
urrent or m	nost recent position, occupation or prof	fession, and name of employer or school	ol, in country of legal permanent res	sidence:
Specify degi	rees held, name of school, country whe	ere school is located, and year degrees v	were awarded:	
	rees held, name of school, country whe	ere school is located, and year degrees v	were awarded:  Country of School	Year Degre Awarded
				_
				_
				_
Degree	Field of Study		Country of School	Awarded
Degree	Field of Study	Name of School	Country of School	Awarded
Degree  Location of	Field of Study  United States Embassy or Consulate at	Name of School  which you will apply for visa (Canadian	Country of School  citizens do not need a visa stamp in	Awarded
Degree  Location of	Field of Study  United States Embassy or Consulate at	Name of School	Country of School  citizens do not need a visa stamp in	Awarded
Degree  Location of	Field of Study  United States Embassy or Consulate at	Name of School  which you will apply for visa (Canadian	Country of School  citizens do not need a visa stamp in	Awarded
Degree  Location of	Field of Study  United States Embassy or Consulate at	Name of School  which you will apply for visa (Canadian	Country of School  citizens do not need a visa stamp in	Awarded

<ol> <li>Provide your foreign residential address         At least one complete foreign residence     </li> </ol>	· · · · · · · · · · · · · · · · · · ·		man maning address provided above.
14. Provide a complete name (and their rela	ntionship to you), address, telephone,	fax number and/or e-	-mail address for a person to contact in
case of an emergency:			
15. Provide a complete history of your visits	to the US for the past six years. List d	ates of stay and types	of visas you used to enter the US. Be sur
to include any time spent in the J nonimmigi			
Visa type	Arrival date		Departure date
I	immigrant status? Yes	No I	
If yes, list dates of stay in the United Sta			rv.
Student Research Scho		Short-term Sch	
		fy:	
Arrival date:	Departure da		
17. Have you ever applied for a waiver of the	e two-year home residence requireme	nt associated with the	e J visa?
Yes No If y	yes, was it approved? Yes	No Pending	5
18. Are you physically located in the: U	Inited States Other Country (ple	ase specify:	)
19. If you are currently in the United States,	are you requesting:		
A transfer from current J program	to the University of Rochester J progra	am	
A change of nonimmigrant status f	from	to	
20. Indicate current nonimmigrant status an			annimation day.
(If you are in the United States)		tatus	expiration date
21. If you are in the United States, indicate la	ast date of entry and port of entry:	date of entry	port of entry

22. Indicate the follo	owing <u>relatives who</u>	are permanent residents or	citizens of the	United States:		
spouse	parent	child (specify age	)	person you are engag	ged to be married to	
If engaged to a U	United States citizen	, indicate date of the pendin	ng marriage:			
		ever filed for you, any forms, US Embassy or Consulate ou		ications or labor certifica	tion for lawful permanent	residence at a
Yes	No					
If yes, please explain	ո։					
24. Has any US visa	application of any k	ind filed by you or for you ev	ver been denied	d? Yes	No	
If yes, please explai	n:					
25. Are you, or any f	family members wh	o will be accompanying you,	, in US exclusio	or deportation proceed	ings? Yes N	o
If yes, please explai	n:					
26. Have you or any amnesty, or other si		ily member ever been arrest	ted or convicted	d for any offense or crime	, even though subject of a	pardon,
If yes, please explain	ո:					
37. If you are marrie	ed, you must check	one box. My spouse and/or o	children (single	and under twenty-one ye	ears of age):	
will be acc	companying me to t	he University of Rochester a	nd traveling at	the same time as me.		
will be acc	companying me to t	he University of Rochester a	nd traveling se	parately from me.		
will remai	in outside of the Un	ited States.				
currently i	reside with me in th	e United States.				
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If spouse and/or children who are single and under twenty-one years of age will be accompanying you to the University of Rochester, <u>please complete the J-1 Scholar Dependent Questionnaire.</u>

# **Funding and Insurance Requirements**

accompanying dependent. When the funding	g is questionable, the hiring o	department will nee	per year), and an additional \$500 per month for each d to guarantee support before ISO will issue a me of visa application by the Exchange Visitor.
Will you be paid through the University payr If no, how will you be supported during you		No	
People who are not paid by the University of 1. Proof of funding must be: 2. Written in English 3. On letterhead from the funding so 4. Signed by someone with the author 5. Include the specific dates of funding 6. Include amount of funding in US d	urce ority to dispense the funds fr ng coverage ollars	rom the funding org	anization alth insurance plan, which is very expensive. Policies
	et by the U.S. Department of	f State. Failure to pu	rchase or maintain proper health insurance may be
The Exchange Visitor must have enough fur are encouraged to work out a realistic budge			and all accompanying family members. Department IS.
<ol> <li>Housing (\$4,800-9,600 per year)</li> <li>Food (\$4,000-6,000 per year)</li> <li>Clothing</li> <li>Childcare (\$7,800-10,400 per year)</li> <li>Travel expenses</li> <li>Moving and settlement expenses to 2,000)</li> </ol>		8. Un (pr 9. Uti 2,5 10. Ref	ensportation (vehicle, insurance, maintenance) covered dental and medical care expenses escriptions, contraceptives, doctor visits) lities – e.g. gas, electric, telephone, internet (\$1,500 00 per year) turn transportation home ner miscellaneous expenses
Type of Funds	Amount P Month or	er Year	Name of Funding Source
University of Rochester			
Foreign Employer			
Foreign Government			
International Organization			
Foreign University			
Personal Funds			
Other			
Total Funding = \$in	from US dollars	date	_ to
Is there any other information the University	of Rochester needs to know	w to process your J I	Exchange Visitor Program request?

The applicant for The University of Rochester's J Exchange Visitor Program must read and	I sign the following:
The information given on this request form is true, correct, and complete according to modecuments submitted are exact photocopies of unaltered documents and I understand the original documents to an Immigration of Consular official at a later date. I have read the ir required insurance and funding. I will comply with the J nonimmigrant status regulations myself and any accompanying family members, during my stay in the United States, the requevacuation insurance and repatriation of remains insurance.	at I may be required to submit information provided regarding and maintain at all times, for
Signature	 date
Signature	uate
printed name	

# Return this questionnaire to your University of Rochester Host Department

The host department will forward this form to the International Services Office at the University of Rochester.