

J-1 Exchange Visitor Checklist

Visa processing times at the U.S. embassies/consulates vary so please submit these documents to International Education (IE) at least two (2) months before the proposed start date of the Exchange Visitor program. If you are applying to extend or transfer the J-1 visa status of an Exchange Visitor currently in the U.S., the hosting department must submit a complete J-1 Exchange Visitor DS-2019 Request packet to IE at least 30 days prior to the proposed start date of the new Exchange Visitor program.

Kindly submit the complete J-1 Exchange Visitor DS-2019 request packet with all the required forms and supporting documents to IE either through the USG secured MOVEIT System or via mail.

To bring a visitor to a USG institution, the host department must:

- Determine that the visitor has the English language skills necessary for visiting a USG institution and participating in expected activities. (Please see page 4 of 7 of the DS-2019 Request Form)
- Confirm that the visitor and any accompanying J-2 dependents will maintain adequate health insurance coverage during the duration of stay in J status, as required by federal law.

Insurance policy must meet the minimum requirements:

- ✓ Both accident and sickness coverage
- ✓ Minimum benefit \$250,000 per policy year
- ✓ A deductible of \$500 or less and/or co-pay per individual, per year
- ✓ In-patient and outpatient, mental and nervous disorder benefits
- ✓ Prescription Drug Coverage
- ✓ Pay benefits worldwide
- ✓ Medical evacuation to one's home country and family reunification of not less than \$50,000
- ✓ Provision for repatriation of remains of not less than \$25,000

Note: We recommend use of the BOR approved PGH Global Plan at <http://www.intlinsure.com/georgiacare/student/review-brochures/>

- Obtain the following required supporting documentation to accompany the J-1 Exchange Visitor DS-2019 Request Form:

- ☐ Complete the J-1 Exchange Visitor Request DS-2019 Form with all required signatures (i.e. International Officer, Department Chair, College Dean).
- ☐ Copies of unexpired passport page(s) showing expiration date and biographic information for exchange visitor and any accompanying dependents (passport must not expire less than six months from program start date).
- ☐ Copy of J-1 exchange visitor current Curriculum Vitae (CV) or resume in English (applicable for scholars only).
- ☐ Invitation letter/offer Letter from institution signed by the exchange visitor, hosting faculty member, and Department Chair/Unit Director indicating position/role, duration of stay, funding provided if any, and 2-3 sentences describing proposed activities (e.g. research or training).
- ☐ Copy of a signed exchange agreement explaining how the exchange visitor qualifies for the J-1 visa (if applicable).
- ☐ Financial Support Documentation – The U.S. Department of State requires the USG to obtain documents showing the visitor's ability to support his/herself and any accompanying J-2 dependents in the U.S. IE requires that the visitor demonstrate at least \$1832 per month in financial support. In addition, \$642 per month is required for an accompanying spouse and \$321 per month for each dependent child on a J-2 visa. *All financial documents must be in English or officially translated into English. Salary statements and/or tax documents are not acceptable.*

- **Financial documentation must meet the following criteria:**

- 1) Not older than 12 months at time of issue
- 2) On original, official letterhead of the bank or funding organization
- 3) Include name of account holder and account number. If account is not in exchange visitor's name, include a statement of support from account holder
- 4) Documentation of monthly salary must state that the visitor will continue to receive the salary for the duration of stay.

- ☐ Institution is responsible for mailing the prepared DS-2019 to the J-1 Exchange Visitor. IE recommends a traceable service such as FEDEX, UPS, DHL. Please provide IE with your institution's FEDEX, UPS, or DHL account number to mail the prepared DS-2019 to your office. Otherwise, the IE will mail the DS-2019 via regular mail.



**UNIVERSITY SYSTEM
OF GEORGIA**
International Education

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404-962-3116 FAX
TAMMY.ROSNER@USG.EDU

J-1 Exchange Visitor Program
DS-2019 Request Form

PLEASE COMPLETE THE FOLLOWING

USG host institution: _____

USG host institution mailing address: _____

Host institution Exchange Visitor supervisor's name: _____

Department: _____ Title: _____

Phone: _____ Email: _____

Visitor's full legal name (exactly as it appears in passport: attach copy of passport):

Surname/family name: _____

Given name/first name: _____

Middle name: _____

(suffix, if any; ie, junior, II, III, etc): _____

DOB: _____ (mm/dd/year)

☐ Male ☐ Female

Birth place (city & country): _____

Citizen of (country): _____

Legal permanent resident of (country): _____

Position in home country (student, faculty, etc.): _____

Employer (or name of university): _____

Exchange Visitor Category (please check one):

☐ Professor ☐ Research Scholar ☐ Short-term Scholar ☐ Specialist

Student (mark one): ☐ Associate ☐ Bachelor ☐ Master ☐ Doctorate ☐ Non-degree

Specific field of study/major, research, or area of professional activity: _____

Please state the program activities or subjects to be studied by the Exchange Visitor while at the USG Institution:

Visitor's permanent home mailing address, phone number, and email address:

Address 1: _____

Address 2: _____ City: _____

State: _____ Country: _____ Postal Code: _____

Email: _____ Phone: _____

Program start date: _____ (mm/dd/year)

Program end date: _____ (mm/dd/year)

TWELVE-MONTH BAR: The Department of State indicates that a professor or research scholar wishing to begin a new exchange program is not eligible to do so if he or she was physically present in J status for all or part of the twelve month period immediately preceding the start of the new exchange program. Has the applicant been an Exchange Visitor in the United States at any time within the past twelve (12) months?

☐ YES ☐ NO

**If yes, please list dates/attach copies of previous IAP-66 forms/DS-2019 forms.*

TRANSFER: Is your exchange visitor transferring from another Exchange Visitor program in the United States?

☐ YES ☐ NO

**If yes, please attach previous DS-2019 form(s).*

Name and Address of Institution(s): _____

EXCHANGE VISITOR FUNDING SOURCE(S): The funding minimum per month is \$1830 (exchange visitors), \$640 (spouse), and \$320 (dependent) for this Exchange Visitor will be provided by (please check all that apply)

___ A. University System of Georgia institution*

Amount of funding: _____

Funds provided by (dept./college): _____

Source of funding (grant/agency): _____

***NOTE: If the visitor will engage in teaching/lecturing where wages or other remuneration are involved, please provide a letter from the visitor's department head or supervisor recommending the exchange visitor's activity and explain how it will enhance the exchange visitor's program. The department head or supervisor must also provide a letter setting forth the terms and conditions of the offer to lecture or consult, including the duration, number of hours, field/subject, amount of compensation, and description of the exchange visitor's activity.**

___ B. A U.S. government agency (direct award to the Exchange Visitor)

Amount of funding: _____

Source of funding (name of agency): _____

___ C. The Exchange Visitor's home government

Amount of funding: _____

___ D. A binational commission of the visitor's home country

Amount of funding: _____

___ E. Another organization providing support

Amount of funding: _____

Source of funding (name of organization): _____

___ F. Personal funds**

Amount of funding: _____

****NOTE: Evidence of personal funding must be provided by the Exchange Visitor in the form of a bank certification or statement indicating availability of funds.**

ENGLISH PROFICIENCY: Department of State regulations mandate that the Exchange Visitor possess sufficient proficiency in the English language to participate in his or her program. English proficiency has been verified in the following way (please check all that apply):

___ Phone Conversation ___ Personal Interview ___ TOEFL Score ___ Approved USG English Proficiency Exam ___ Native Speaker Language

MANDATORY HEALTH INSURANCE: The insurance coverage for the Exchange Visitor (and any accompanying spouse or dependent) must be valid for the entire duration of the exchange program. Minimum coverage shall provide medical benefits of at least \$100,000 per accident or illness; repatriation of remains in the amount of \$25,000; medical evacuation to the Exchange Visitor's home country in the amount of \$50,000; and a deductible that does not exceed \$500 per accident or illness.

**PGH Global Insurance offered through USG is recommended for those who did not bring insurance with them.*

SPONSOR VERIFICATION: As the Department Sponsor of this Exchange Visitor, I hereby attest that the information provided in this application is correct to the best of my knowledge. I further confirm that I and my institution will fulfill all responsibilities associated with hosting this Exchange Visitor, including providing pre- arrival and orientation information to the Exchange Visitor participant as well as information about mandatory health insurance; offering cross-cultural experiences for the purpose of sharing language, culture, or history of the Exchange Visitor's home country; providing adequate support services to the Exchange Visitor; and appropriately monitoring the Exchange Visitor.

School International Officer: _____ Date: _____
Signature

Department Chair: _____ Date: _____
Signature

College Dean: _____ Date: _____
Signature

Please return this completed form to:

Tammy Rosner, BOARD OF
REGENTS

270 WASHINGTON ST. SW
ATLANTA GA 30334-8600

PHONE: 404-962-3061

FAX: 404-962-3116

EMAIL:

tammy.rosner@usg.edu

DEPENDENTS: (please check the appropriate category):

☐ Exchange Visitor will not bring dependents.

☐ Dependent(s) will be joining the Exchange Visitor at a later date.*

☐ Dependent(s) will travel with the Exchange Visitor.*

***Dependent information:**

Surname/family name: _____

Given name/first name: _____

Middle name: _____

(Suffix, if any; ie, junior, II, III, etc): _____ Date of Birth: _____ (mm/dd/yyyy)

☐ Male ☐ Female Relationship to Exchange Visitor: _____

Birth Place (city & country): _____

Citizen of (country): _____ Legal permanent resident of (country): _____

***Dependent information:**

Surname/family name: _____

Given name/first name: _____

Middle name: _____

(Suffix, if any; ie, junior, II, III, etc): _____ Date of Birth: _____ (mm/dd/yyyy)

☐ Male ☐ Female Relationship to Exchange Visitor: _____

Birth Place (city & country): _____

Citizen of (country): _____ Legal permanent resident of (country): _____

***Dependent information:**

Surname/family name: _____

Given name/first name: _____

Middle name: _____

(Suffix, if any; ie, junior, II, III, etc): _____ Date of Birth: _____ (mm/dd/yyyy)

☐ Male ☐ Female Relationship to Exchange Visitor: _____

Birth Place (city & country): _____

Citizen of (country): _____ Legal permanent resident of (country): _____



**BOARD OF REGENTS OF
THE UNIVERSITY SYSTEM OF GEORGIA**

J-1 Fact Sheet for Inviting Institutions and Visiting Scholars

The responsible officers for the University System of Georgia's (USG) J-visa program are at International Education (IE). The regulations that IE responsible officers and USG must follow for the J program are at 22 CFR 62. Additionally, there are university policies and procedures that further clarify how USG follows those regulations. Policies and procedures may differ among designated sponsors.

Restrictions associated with the J visa:

- The J visa program should be used only for collaborative and/or supervised research. Independent research programs should be carried out under a B visa.
- The J visa program cannot be used for any tenure-track, permanent, or regular employment positions. It is appropriate for short-term, temporary research and/or teaching positions, such as post-docs or visiting instructors.
- The Research Scholar category can be issued or extended up to a maximum of 5 years, including time spent in J1 status at any other institution immediately prior to the USG sponsorship.
- The Short-term Scholar category can be extended up to a maximum of 6 months. IE generally chooses this category for any stay of 6 months or less, unless otherwise instructed by the inviting department.
- After completing any length of time in the Research Scholar category, at any institution in the U.S., J visa sponsors are not permitted to issue another DS-2019 for this category for 2 years.
- The above two-year bar also applies to J2 dependents of those in the Research Scholar category.
- Change of status inside the U.S. from J1 to F1 status is most often not possible.
- Those wishing to fulfill a full-time degree program should obtain a F1 visa, rather than the J1.
- Family members in J2 status are not permitted to remain in the U.S. once the J1 researcher has ended their program and exited the U.S.
- Visitors in J1 status may become subject to the two-year home residence requirement (212e) due to their home or U.S. government funding for their visit or due to the skills set list-
<https://travel.state.gov/content/visas/en/study-exchange/exchange/exchange-visitor-skills-list.html>.
- According to federal regulations, the J1 visa status of any visitor must be terminated for failure to maintain required insurance or misrepresentation of insurance coverage, failure to report a change of residential address within 10 days, or failure to pursue proposed activities.
- Hosting institutions are responsible for reporting to IE any research or teaching program changes, changes in the visitor's site of activity, concerns about the visitor or their family's health or welfare, or any potentially embarrassing situations associated with a visitor.