DS-2019 Request Form for Scholars
Part I: Scholar Form

Part I: J-1 Personal Information (to be filled out by Scholar):

Name (*as written on passport*) _____ _____
Family *First/Middle Names*

Gender: ☐ Male ☐ Female Date of Birth (MM/DD/YYYY) _____ Skype Username _____

Place of Birth _____ Email Address _____
City *Country*

Country of Citizenship _____ Country of Legal Permanent Residence _____

Previous Visa History:
Have you or any of your dependents previously been in the U.S. on a J visa (J-1 or J-2) in the past 2 years? ☐ Yes ☐ No

If yes, please answer the following and provide copies of all of your previous DS-2019s.

- What dates were you in the J status?_____
- What category (#4 on the DS-2019) of J visa did you have? _____
- Did you apply for a waiver of the 212e home residency requirement? ☐ Yes ☐ No Was the waiver granted? ☐ Yes ☐ No

Previous Employment Information:

Title of last position held in home country (student, researcher, professor, etc.): _____

Type of position: ☐ Government ☐ Private Sector ☐ Academic ☐ Undergraduate Student
☐ Graduate Student Other_____

Dependents: Please include the following for each dependent: 1) Copy of passport. 2) Proof of relationship (i.e. marriage certificate or birth certificate in English). 3) Proof of funding. ***Please note that ALL scholars must have a minimum total funding of $2000/month for the J-1 visa, plus funding for dependents (an additional $405/month for spouse and $150/month per child). Funding for dependents must be for the same number of months as the J-1 scholar's stay.***

Dependent 1
Full Name _____
Date of Birth _____
City of Birth _____
Country of Birth _____
Country of Citizenship _____
Country of Permanent Residency _____
Personal Email Address _____

Dependent 2
Full Name _____
Date of Birth _____
City of Birth _____
Country of Birth _____
Country of Citizenship _____
Country of Permanent Residency _____
Personal Email Address _____

Dependent 3
Full Name _____
Date of Birth _____
City of Birth _____
Country of Birth _____
Country of Citizenship _____
Country of Permanent Residency _____
Personal Email Address _____

Dependent 4
Full Name _____
Date of Birth _____
City of Birth _____
Country of Birth _____
Country of Citizenship _____
Country of Permanent Residency _____
Personal Email Address _____

Will dependents travel separately ☐ Yes ☐ No
Note: *Dependents cannot arrive to the U.S. before the scholar.*

Printed Name: _____ Signature: _____ Date: _____

J-1 Scholar Statement of Understanding

Office of International Students and Scholars (OISS) *Revised January 13, 2016*

As a condition of your J-1 status, please read over carefully, **initial** each statement, and sign.

I, _____ (print first and last name), plan to come to Rice University as a J-1 Exchange Visitor and understand that I am responsible for maintaining my immigration status while in the U.S., which includes but is not limited to the following requirements:

_____ 1. I have reviewed the J-1 Health Insurance PowerPoint on the OISS Scholar Health Insurance web page and understand that I must maintain health insurance for myself and my J-2 dependents throughout my entire J-1 stay. I understand that I will be required to provide proof of health insurance to OISS. **Furthermore, I understand that if I neglect to purchase health insurance or maintain coverage for myself or my dependents, I will be terminated from the J-1 program by Rice University and the termination reported to SEVIS and the U.S. Department of State, as per *22 CFR 62.14*.**

_____ 2. I understand that if my dependent(s) come to the US separately, at a later time, they need to check-in with OISS and show proof of health insurance upon their arrival. I understand that it is my responsibility to maintain health insurance for my dependents and provide proof to OISS at the time of their arrival. (*22 CFR 62.14(h)*)

_____ 3. I understand that if I am requesting an extension of stay at Rice, I will not only need to work with my academic department for the required extension documentation, but that I will also need to submit updated proof of insurance for myself and my dependents for the additional time before my DS-2019 is updated. (*22 CFR 62.20(i)(3)*; (*22 CFR 62.14(b)*)

_____4. I understand that I may need to provide OISS with original financial documents upon my arrival in order to verify my financial status. (*22 CFR 62.12(b)(1)(i)*)

_____ 5. I understand that I must have a valid passport (at least 6 months into the future), a valid DS-2019 and an I-94 stamp with J-1, D/S to be considered in-status in the U.S.

_____ 6. I understand that I may never work outside the Rice University academic department listed on my DS-2019 unless I have first received authorization from OISS. I also understand that I must inform OISS if I end my program or leave before the end date indicated on my DS-2019. (*22 CFR 62.16),* (*22 CFR 62.23(f)(2)*

_____ 7. I understand that I must report changes to my U.S. address by updating my ESTHER account within 10 days of an address change. (*22 CFR 62.10(d))*

_____8. I understand that I must get a travel signature if I leave the U.S. during my time at Rice and plan to return to resume my program, *as per the requirements stated on the back of my DS-2019 form*. If I plan to stay out of the country for an extended period of time, I also understand that I will need to get authorization to do this from both my academic department and OISS **before** I go.

_____9. I understand that I must report if my dependent(s) leave the U.S., and do not plan to re-enter, by emailing oiss@rice.edu within 10 days of their departure. (*22 CFR 62.13(a)(4))*

_____ 10. I understand that I may have the opportunity to transfer my J-1 status to another academic institution to work on the same research objectives, but that I must first meet with OISS about the process and the timeline. (*22 CFR 62.42)*

_____ 11. I understand that I must report any of the following situations to OISS as it may affect my immigration status: birth of a child, marriage, change of legal name, divorce, hospitalization, long periods out of country, etc. (*8 CFR 214.2(j)(1)(viii))*

_____ 12. I understand that I must participate in American cultural activities and report my experiences to OISS. (*22 CFR 62.8(d)(2))*

_____ 13. I understand there may be restrictions on returning to the U.S. after my J-1 period ends. Click here for more information. *(22 C.F.R. § 62.20(d))*

_____ 14. I understand that applying for the 212(e) waiver while I am under Rice University's J Exchange Visitor sponsorship carries significant visa implications and limitations to visa extensions, institution transfers, and funding for change of visa status to H-1B. As such, I understand it is in my best interest to discuss the timeframe for applying for the 212e waiver with an OISS advisor. (*INA § 212(e); 22 C.F.R. § 41.62(c)-(d); 22 C.F.R. § 41.63; 22 C.F.R. § 40.202; 8 C.F.R. § 248.2(a))*

_____ 15. I understand that Rice may not sponsor (and/or support) an H1-B, or any other visa, if the 212e waiver process is not discussed and approved by OISS and my academic department prior to application.

_____ 16. I certify that none of the documentation or information I have submitted is false. If any documentation or answers I have provided are found to be false, I understand my status will be terminated and I must leave the U.S. immediately.

By signing below, I understand and have read the J-1 Scholar Statement of Understanding and agree to comply with the U.S. Department of State (DOS), U.S. Department of Homeland Security (DHS), and U.S. Citizenship and Immigration Services (USCIS) immigration regulations throughout my time at Rice University in J-1 status.

_____

Scholar's Name Printed Scholar's Signature Date

J-1 1 Exchange Visitor's bringing dependents (spouse/children) to Rice University will need to fill out the following form to verify insurance compliance.

Dependents:

Name	Relationship	Date of Birth

Dependent Insurance Information

Verification of health insurance must be provided to the OISS in English and certify that all J insurance requirements are covered. Please visit http://oiss.rice.edu/scholarhealthinsurance/ for more information on the insurance requirements, common insurance carriers, and additional resources.

☐ 1. The J-2 (s) is/are/will be insured under the same policy as the J-1.

☐ 2. The J-2 (s) is/are/will be insured under another policy.

Name of Insurance Company _____ Contact Phone Number _____

Policy Name/Number _____ Dates of Coverage _____

J-1 Scholar Attestation:

Please read carefully, initial each statement, and sign.

_____I have reviewed the J-1 Health Insurance PowerPoint on the OISS Scholar Health Insurance web page and understand that I must maintain health insurance for myself and my J-2 dependents throughout my entire J-1 stay. I understand that I will be required to provide proof of health insurance to OISS, and may be required to show proof to the Department of State (DoS) upon request. **Furthermore, I understand that if I neglect to purchase health insurance or maintain coverage for myself or my dependents, I will be terminated from the J-1 program by Rice University and the termination reported to SEVIS and the U.S. Department of State, as per *22 CFR 62.14*.**

_____I understand that if my dependent(s) come to the US separately, at a later time, they need to check-in with OISS and show proof of health insurance upon their arrival. I understand that it is my responsibility to maintain health insurance for my dependents and provide proof to OISS at the time of their arrival. (*22 CFR 62.14(h)*)

_____I certify that none of the documentation or information I have submitted is false. If any documentation or answers I have provided are found to be false, I understand my status will be terminated and I must leave the U.S. immediately.

Scholar's Name Printed _____ Scholar's Signature _____ Date _____

Information about the J-1 English proficiency interview at Rice

If you are applying for a J-1 visa to work or study at Rice, you may be required to have an English language proficiency interview. This interview is designed to establish your English proficiency level, as required by the US government for the J-1 visa.

You are NOT required to have this interview if you (1) have taken the TOEFL or IELTS test, have your results, and meet the admissions requirements, or (2) if you hold a degree (or high school diploma) from a country where English is the official language.

A day and time for the interview will be arranged by the Rice department or program with which you will be associated while at Rice. Please wait to be contacted by that department or program. Interviews will be conducted via Skype, so please establish a Skype account (and test your connection) before the interview arrangements are finalized.

The interviews are conducted by staff from Rice's Center for Written, Oral, & Visual Communication. At the agreed upon time, the interviewer will contact you on Skype. The interview will take about 25 minutes and has two parts. In the first part, the interviewer will ask you questions about your current work as well as past experiences learning English. In the second part, you will be given a short document to read about working [or studying] at Rice, and then you will be asked a few questions about the reading.

Your results will be sent to the sponsoring department/program at Rice and added to your J-1 application materials.

If you have additional questions about the English proficiency interview or the J-1 visa application process at Rice, please contact the Office of International Students and Scholars at oiss@rice.edu.

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