
USF Exchange Visitor/Scholar DS-2019 REQUEST FORM

International Services is responsible for administering, approving and signing all documentation connected with the J-1 Exchange Visitor Program at the University of South Florida (**P-1-03445**). This program brings qualified scholars and professors to the United States for teaching, research, observation, consultation, and cross-cultural activities.

USF's J-1 program is authorized to issue DS-2019 forms in the following scholar categories:

- **SHORT TERM SCHOLAR:** A professor, research scholar, specialist, or a person with similar education or accomplishments coming to the US for a short-term visit of 1 day to 6 months for the purpose of lecturing, observing, consulting, training, or demonstrating a special skill at USF.
- **RESEARCH SCHOLAR:** An individual primarily conducting research, observing or consulting in connection with a research at USF from 3 weeks to 5 years in duration. This cannot be used for a USF tenure track position.
- **PROFESSOR:** An individual primarily teaching, lecturing, observing or consulting at USF from 3 weeks to 5 years in duration. This cannot be used for a USF tenure track position.
- **SPECIALIST:** An individual who is an expert in a field of specialized knowledge or skill coming to the US for observing, consulting, or demonstrating this knowledge or skill for up to one year. The individual can receive a stipend if arranged prior to the visit but cannot fill a line position at USF.

The Two Year Home Residency Requirement

Upon completion of an exchange visitor program in the US, certain J-1 exchange visitors are required to live in their home countries for a period of 2 years before they are eligible to apply for immigrant status or work visas. This requirement applies to exchange visitors who (1) are financially supported by the U.S. government or their home governments; or (2) have skills which are needed in their home countries, as specified on the Exchange Visitor Skills List; or (3) are medical doctors who have graduated from a foreign medical school and have come to the United States to study or work in the field of medicine.

12 Month and Two Year Bars for Research Scholars and Professor Categories

J-1 exchange visitors in any J category other than short-term scholar who were in the US for a period longer than 6 months at anytime within the past 12 months are not eligible to return as a J-1 Research Scholar or Professor until one year has elapsed from last exit in J-1 status. In addition, J-1 exchange visitors using the Research Scholar or Professor categories are not eligible to return as a J-1 Research Scholar or Professor until two years has elapsed from the date of last exit from the U.S. If this will affect your proposed scholar, contact International Services to discuss possible alternative options.

Health Insurance Requirement

Immigration regulations require that all J exchange visitors have health insurance that meets the following minimum federal requirements:

- Medical benefits of **at least** \$50,000 per accident or illness
- Repatriation of remains in the amount of \$7,500
- Expenses associated with the medical evacuation of the exchange visitor to his or her home country in the amount of \$10,000
- A deductible not to exceed \$500 per accident or illness.

USF Student Health Services insurance policy for international students, graduate students, and postdoctoral fellows meets this requirement and is recommended for use by all USF exchange visitors. Policy information, current costs, and sign-up is available at <http://www.shs.usf.edu/insurance/insurance-forms.aspx>

Tips for the USF Sponsoring Department

- Departments should request a DS-2019 form for the same period covered in the scholar's letter of appointment, offer letter or letter of support.
- Departments should submit requests at least three and ideally six months prior to the individual's start date at USF to ensure that the exchange visitor **will have adequate time to apply for the visa and arrange travel.**
- The spouse and dependent children (unmarried and under 21 years of age) may apply for J2 dependent visas to accompany the J1 scholar or professor. (Complete appropriate sections of the request form).
- The department should arrange for office space, access to office equipment (computer, phone, etc), and a USF email address as deemed appropriate to the proposed activity.
- Since there is currently no USF housing for exchange visitors, our office refers all requests for accommodation to USF's Off-Campus Housing Office. Their website at <http://sra.usf.edu/och/> includes a searchable listing of short term and long term accommodations.
- USF's chapter of Friends of Internationals provides free airport pickup from the Tampa airport. This must be arranged by the department or visitor at least **two weeks in advance.** To request this service go to http://www.internationals.org/friends_of_internationals_airport_rides.php
- Exchange visitors who are employed by the department must complete the normal USF Right Start process to obtain an ID card and other access. Exchange visitors who are not employed will receive a university U number upon check-in with our office. This will allow the exchange visitor to obtain an ID card and access to computers and the library.
- The department is expected to verify that the exchange visitor's academic credentials are appropriate to the proposed program objectives and agrees to supervise the activity during the exchange visitor's stay at USF.
- The department agrees to assist our office with the collection of immigration documentation and proof of health insurance as required by law, to contact our office before changes are made to the exchange visitor's program and prior to completion of program.

Step-by-Step Application Process

1. USF Department requests a DS-2019 form by completing the attached Exchange Visitor Request Form and submitting to International Services with the following accompanying support materials:
 - a. Copies of exchange visitor's current passport biographical page and any accompanying dependents.
 - b. Documentation of funding (if paid by the department, include the department's offer letter)
 - c. *If exchange visitor is currently **inside** the US, please also include:*
 - i. *Current visa stamp in passport*
 - ii. *I-94 Card (front and back of white card stapled into passport)*
 - iii. *DS-2019 Form from current institution, if currently in J-1 status.*
2. International Services issues the DS-2019 within **10 business days** of a request form with all necessary signatures (USF department head and college dean) and support materials.
3. Unless the department indicates below that they will send via Express Mail, all DS-2019's are sent via regular airmail by International Services.
4. If outside the United States, the exchange visitor pays the SEVIS fee (I-901) and applies for the J-1 visa at the nearest U.S. Embassy or Consulate. If the Consular Office determines that the person is a bona fide exchange visitor, the J-1 visa will be granted and the exchange visitor and dependents may enter the US up to thirty days before program begins.
5. If the exchange visitor is already inside the US, International Services will contact the current J program sponsor to arrange transfer of the J to USF. The final DS-2019 is picked up upon arrival to start the program at USF.
6. Once the exchange visitor arrives in Tampa, he/she must check in with International Services within 10 days of start date on DS-2019 form. Failure to do so will jeopardize the individual's legal status in the US.

For additional information about the J Program contact International Services at 813-974-5102.

Please complete all items and forward supporting materials to International Services at USF Mail point CPR107:

Scholar Biographical Data:

Name: _____ Male
Family Name (as in passport) First Name Middle Name Female

Date of Birth: _____ Place of Birth: _____
Month/Day/Year City Country

Citizens of: _____ Legal Permanent Resident of: _____
Country Country

Position title in home country: _____
(Please be as specific as possible including job title and name of employer. If a student, specify if MS or Ph.D.)

Highest academic degree: _____ Scholar's specialized field: _____

Address in Home Country: _____

Email Address: _____ Phone Number: _____

Has the scholar held J-1 or J-2 immigration status at any institution in the past 12 months? Yes No
If yes, give dates and locations of all visits in the last 12 months _____
If scholar is currently in the US attach copies of all previous DS-2019 forms.

Will the scholar be accompanied by spouse and/or children? Yes No
If yes, submit copies of the biographical page of passport for each dependent
Also provide city and country of birth, relationship to J-1 (spouse or child) for each on a separate sheet of paper.

Details of the Exchange Activity

Proposed Dates of Program: Begin Date: _____ End Date: _____
Month/Day/Year Month/Day/Year

Category: (This is not necessarily the exchange visitor's current position in home country. See definitions above)
 Short-term Scholar Research Scholar Professor Specialist

Specific field/subject of the proposed activity (i.e. Engineering or Chemistry): _____

USF position title (if appointed to a USF position): _____

Brief explanation of proposed activity (include Names of USF research partners, subject of research/ teaching, purpose for research/ teaching stay at USF) **(attach separate sheet if necessary):**

Site of proposed activity: _____

What evidence do you have that this scholar possesses sufficient proficiency in English to participate in the proposed activity?
(Examples: personal conversation or TOEFL score) _____

Financial Verification

The department sponsor must verify that funding is available for the incoming exchange visitor and dependents. The following estimate constitutes a minimum per year cost for housing, meals, transportation, and personal expenses:

Scholar = \$18,373/year (\$1531 per month) and each dependent = \$ 5,000/year

The following financial support in US Dollars will be provided to/by the exchange visitor: (Please attached official letters or bank statements to the request form, if from any source other than USF department):

- The University of South Florida -- Amount: _____ Funds provided by (college/dept): _____
- US Government Agency (direct award) -- Amount: _____ Source: _____ [name of agency]
- Exchange Visitor's home government -- Amount : _____
- A Bi-national Commission of the visitor's country -- Amount of funding: _____
- Other organizations -- Amount: _____ Source _____ [name of organization]
- Personal Funds -- Amount: _____ Verified by submitting bank certification or letter indication availability of funds.

Exchange Visitor Health Insurance Verification:

According to Federal Regulation 22 CFR 62.14, each J scholar is to have insurance in effect, which covers the scholar and his or her dependents for sickness or accident during the period of participation in the exchange visitor program. Minimum levels of coverage must provide:

- a) Medical benefits of at least US\$50,000 per accident or illness;
- b) Repatriation of remains in the amount of US\$7,500;
- c) Expenses associated with medical evacuation of the scholar to his or her home country in the amount of US\$10,000;
- d) A deductible not to exceed US\$500 per accident or illness.

I am in compliance with the above mentioned insurance requirements for myself and my dependents and will maintain this required insurance coverage during my entire stay at the University of South Florida. I have enclosed a copy of my current health insurance card showing coverage for the requested extension period.

Exchange Visitor Signature: _____ Date _____

Department/College Verification: As the Department Sponsor of this Exchange Visitor, I hereby attest that the information included in this application is correct to the best of my knowledge:

Faculty Name and Title: _____

Faculty Department/Campus Address: _____

Faculty Phone: _____ Faculty Email: _____

Faculty Signature: _____ **Date:** _____

Signature of approval Department Chair: _____ **Date:** _____

Name of Department Chair/Head: _____

Signature of approval Dean: _____ **Date:** _____

Name of College Dean: _____

All DS-2019 packets are sent via regular airmail. If your department will send Express Mail please enter the name of the department staff that should be contacted for packet pick up: Contact: _____ Phone: _____

Please return this completed form to: International Services, Mail point: CPR 107
Office location: Cooper Hall, 4th Floor, Room CPR469