

J-1 Exchange Visitor: Department Request for Issuance of Form DS-2019

Marquette University has been granted permission by the U.S. Department of State to host international exchange visitors who will engage in activities as a Professor, Research Scholar, or Short-term Scholar. J-1 visa status can be granted for this activity and a Form DS-2019 will be issued by the Office of International Education (OIE) for eligible visitors to apply for the J-1 visa. More details about the requirements for the exchange visitor and hosting department are available from OIE.

To request the issuance of the Form DS-2019 for a J-1 Professor, Research Scholar or Short-term Scholar, the Marquette Host must provide the following documents to OIE:

1. Department Request for Issuance of Form DS-2019 (this form)
2. Appointment letter or other written confirmation that visitor's purpose can be achieved at Marquette including specific dates of the visit. This letter must be signed by College Dean or Office of the Provost.
3. Evidence of financial support (see Part IV for details)
4. Evidence of English proficiency (see Part VI for details)
5. Scholar Personal Data Form – completed by the prospective visitor
6. CV or Resume
7. Brief Statement of Purpose, written by the prospective visitor
8. Copy of passport ID page
9. Copy of passport ID page(s) of dependent(s), if applicable

Part I: HOST DEPARTMENT AND SUPERVISOR INFORMATION

Host Department: _____

Marquette Host Professor/Supervisor: _____

Phone: _____

E-mail: _____

Part II: EXCHANGE VISITOR INFORMATION

Name of visitor as spelled on the passport:

Family name: _____ First Name: _____

Gender: _____ Birth Date (month/day/year): _____ / _____ / _____

Email: _____

Country of Citizenship: _____

Part III: PROGRAM INFORMATION

This request is to: ☐ Begin a **new** J-1 exchange visitor program at Marquette University

☐ **Extend** a current J-1 program

☐ **Transfer** a visitor from a different J-1 program to Marquette
Name of current institution: _____

Specific activity in which the visitor will be engaged at Marquette:

(Example: 1-2 sentences such as "Research in Optimization Theory with occasional lectures to graduate students.")

U.S. Code and description for this activity: _____
(OIE will determine this code with your assistance.)

Period of proposed activity: (month/day/year): From: _____ / _____ / _____ to: _____ / _____ / _____

(Dates should reflect period of actual campus activity. The visitor may arrive up to 30 days prior to the start of the activity and may remain in the U.S. for up to 30 days after the end of the program.)

Where will the activity take place?

Primary location (building and complete street address):

Any other locations? Yes ☐ No ☐ If yes, please indicate location: _____

Part IV: SOURCES AND AMOUNTS OF FINANCIAL SUPPORT

Please indicate the visitor's documented financial support for the proposed period.

Marquette University support	\$ _____	(include an offer letter signed by College Dean or Provost)
Visitor's Personal Funds	\$ _____	(include documentation*)
Other Financial Support	\$ _____	(source: _____ include documentation*)
Total for the Proposed Period	\$ _____	

Minimum expenses are estimated to be \$1,500/month for a scholar. Additional expenses for dependents are estimated to be \$975/month for spouse and \$500/month for each child, when the spouse is present.

*The kind of financial documentation depends on the visitor's source(s) of support. Bank statements, a sponsorship statement from family members with a bank statement, or official sponsorship statements from the visitor's government or other sponsoring agency may be appropriate. In any case, the documentation needs to state clearly how much money will be available to the visitor for what period of time.

Will the United States government provide any financial support for the express purpose of supporting this visitor?
Yes ☐ No ☐

Part V: COMPLIANCE WITH THE HEALTH INSURANCE REQUIREMENT:

Exchange visitors with J-1 visa status and their dependents are required to have health insurance throughout their stay in the United States. In most cases, the visitor will be required to enroll in the OIE international group insurance plan. Because of minimum coverage requirements, visitors who are eligible for Marquette employee benefits will enroll in the OIE insurance, not a health plan offered by MU Human Resources. The university, however, will contribute toward the cost of the coverage. Further explanation is available at OIE. Please indicate below the insurance situation for this visitor:

- a) ☐ The visitor is not eligible for Marquette employee benefits, such as health insurance. The visitor will enroll in the OIE international group insurance plan for J-1 exchange visitors and will remain in this plan for the duration of status as a J-1 visitor. Payment is required at the time the visitor begins his/her program for the full period of the visitor's participation or until the end of the current insurance term (generally July 31), whichever is earlier.

Who is responsible for the OIE group insurance payment?

- ☐ Exchange visitor (Payment instructions will be sent by OIE with visa documents)
- ☐ Marquette Host

If the Marquette Host will pay for health insurance, please indicate account number to be charged. You will receive an internal billing form for the full expected period or until the end of the current insurance term, whichever is earlier.

Account # _____ (14-digits required)

Authorized Account Signature: _____ Date: _____

Printed Name of Signer: _____

- b) ☐ The visitor is eligible for Marquette employee benefits, such as health insurance. The visitor will enroll in the OIE international group insurance plan for J-1 exchange visitors and the university will contribute toward the cost of insurance. OIE will arrange for the payments with the university and the visitor. The visitor will remain in this plan for the duration of status as a J-1 visitor.
- c) ☐ The visitor has other coverage which meets the federal requirements for J-1 health insurance. Please enclose evidence of this coverage.

Part VI: ENGLISH LANGUAGE PROFICIENCY

Federal regulations require "sufficient proficiency in the English language, as determined by an objective measurement of English language proficiency, successfully to participate in his or her program and to function on a day-to-day basis."

How do you know that this visitor has the English language proficiency for this experience, including not only the formal Marquette activity, but also the ability to function in daily life in the United States?

- ☐ Results from a recognized English language test such as TOEFL, IELTS, Cambridge (attach documentation)
- ☐ Signed documentation from an academic institution or English language school (attach documentation)
- ☐ Interview conducted in-person or by videoconferencing by Marquette-designated English instructor (Contact OIE for more details about arranging this interview.)
- ☐ Scholar completed a degree in an English speaking country
- ☐ Other evidence. Please explain:

Part VII: MAILING THE FORM DS-2019 AND VISA DOCUMENTS:

Name and exact mailing address: Name: _____
Street 1: _____
Street 2: _____
City, State, Postal Code: _____
Country: _____

Mailing method: ☐ US Postal Service first-class mail or international airmail (may take 2-3 weeks)
☐ Express Courier (FedEx)

Part VIII: HOST PROFESSOR/SUPERVISOR APPROVAL

I certify that I will be the primary host for this visitor for the entire period listed above and I understand my responsibilities as the host. If the visitor leaves early or is absent for more than 30 days, I will inform OIE.

Host Professor/Supervisor Signature

Name (printed)

Date _____

Please return this completed form and any enclosures to:

Ellen Blauw, Associate Director
Office of International Education
Holthusen Hall, 4th floor
Phone: 414-288-5599
Fax: 414-288-3701

(J-1 DS 2019 01/2019)