

Process of Becoming a J-1 Exchange Visitor at GSU

- 1. Submit application (pages 2-4 of this form) and all supporting documents to your GSU academic department:
 - a. Provide copies of all DS-2019 forms for the past three years, including your current DS-2019 if you are in J-1 status.
 - b. Provide a copy of your current I-94 card (front and back if you are in the U.S. or electronic printout of arrival/departure information if you entered the U.S. after 4/30/2013, which can be obtained at *www.cbp.gov/i94*.)
 - c. Provide copies of passport biographical pages for you and any accompanying dependents.
 - d. Provide a copy of your current curriculum vitae (C.V.).
 - e. Submit original financial documents. The Office of International Services (OIS) will not return them to you. *Note: Original financial documents are also required for your U.S. visa application at the U.S. embassy or consulate. Current funding requirements per month: \$1,000 for Exchange Visitor, \$500 for first dependent, and \$365 for each additional dependent.
- 2. OIS will mail you the DS-2019 immigration form, along with other documents you need to apply for your J-1 visa at a U.S. consulate or embassy outside the U.S.
- 3. All initial J-1 visa applicants must pay the SEVIS fee before applying for a U.S. visa. SEVIS fee information can be found at *www.fmjfee.com*. You cannot pay this fee until you have received the DS-2019 from GSU.
- 4. Prior to entry into the U.S., obtain the health insurance coverage required by U.S. immigration law.

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This page is to be completed by the Exchange Visitor

Exchange Visitor Biographical Information

* Enter all names as they appear on your passport

Family Name/Surname		First Given Name	Middle
□ Male □ Fema	le Date of Birth (MMIDDIY	YYY) —	
Country of Birth		City of Birth	
Country of Legal Perman	ent Residence	Country of Citizenship	
University ID Number		Highest Degree Earned	
Position/Title in Country	of Legal Permanent Residence	(If a student, indicate "graduate" or	"undergraduate"):
Name of institution whe	re you currently work or study_		
The above institution is:		☐ State, Regional, or Provincial	☐ City or Town
Home Country Address	Other: 5 – Street, House Number, Apt.		
City/State/Postal Code			
U.S. Address (if current	ly in the U.S.) – Street, House N	lumber, Apt.	
City/State/ZIP Code			
Email Address			
What is your objective ir	i coming to GSU and participat	ing in the Exchange Visitor program	?
Do you intend to study a	luring your program at GSU?	□No □Yes	
*Note: You may attend classes		am. However, attending classes must not beco	ome your primary purpose



Office of International Services

1 University Parkway, C3370 University Park, IL 60484 708.235.7611 Fax: 708.235.7372 ois@govst.edu www.govst.edu/ois

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Exchange Visitor Name:

Dependent Information

- Only include dependents who will accompany you to the U.S.
- Dependents are defined as your spouse or unmarried children under 21
 Do not include dependents who are U.S. citizens
- Complete the following table. Attach an additional sheet if necessary.

Name (Family, Given Name)	Relationship	Gender	Birthdate (MM/DD/YY)	City of Birth	Country of Birth	Country of Legal Permanent Residence	Country of Citizenship

Immigration History in the U.S.

Are you currently in the U.S.? No Yes

If yes, indicate your current nonimmigrant status (ex. B-1, F-2, etc.): _____

Have you been in any J status in the past three years?	ΠNo	☐ Yes – If ves, fill out the J Status Chart below

Are you subject to the two-year home residency requirement [212(e)]?	□No	🗌 Yes	□ Not Sure
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If yes, have you fulfilled the requirement?	□No	🗌 Yes	□Not sure
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Have you applied for and received a waiver of the two-year residency requirement [212(e)]? No Yes

If you are currently in the U.S., will you:
Leave the U.S. and re-enter in J-1 status, OR

Remain in the U.S. and apply for a change of status through USCIS (Allow six months), OR

□ Not applicable; I already have J-1 status

J Status Chart (only include information which covers the past three years):

Status: J-1 or J-2	Exchange Visitor Category (on DS-2019, box #4	Start Date (MM/DD/YY)	End Date (MM/DD/YY)



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Health Insurance Requirement

U.S. immigration law requires J-1 Exchange Visitors and their J-2 dependents to carry health insurance for the entire period of their program. Health insurance is part of your legal immigration status. Health insurance coverage must meet specific U.S. Department of State Exchange Visitor requirements.

Upon arrival at GSU, you must present to OIS:

- 1. Proof of health insurance AND
- 2. Information about the health insurance policy to show it meets immigration requirements

Exchange Visitor Certification

By initialing below, I acknowledge that I have reviewed and understand the following:

Initial	I will check-in with the Office of International Services (OIS) upon arrival at GSU with my immigration documents and proof of insurance.
Initial	I will fully comply with all U.S. immigration law and regulations, including insurance requirements. I realize that failure to maintain legal status will result in immediate program termination.
Initial	I understand that any activity that is NOT part of the exchange program is restricted. I will obtain ap- proval from my department and from OIS before I participate in any academic or professional activity that is not part of my program.
Initial	I understand that several restrictions apply to the J-1 Exchange Visitor status, including but not limited to restrictions on the length of the program, repeat participation, and return to country of residence.
	I understand that employment outside of my specific program is illegal.
Initial Initial	I understand that I can only enter the U.S. up to 30 days prior to my start date. I also understand that if I fail to check-in with OIS within two weeks after my start date that I will be terminated from my program. I will notify my academic department immediately if I anticipate delays to my program start date so that OIS can defer the program start date accordingly.
Initial	After arrival, I will notify OIS of all U.S. residential address changes within 10 days of my move for the duration of my program. I understand that address notification is required by U.S. immigration law.

Statement of Release: I understand that immigration regulations are subject to change, and ultimately it is my responsibility to be aware of such changes. I further understand that any misrepresentation of information or document fraud may affect my J-1 Exchange Program at Governors State University. Lastly, I hereby authorize the University to disclose copies of certain documents related to my immigration status to federal agencies if requested to maintain compliance.

Exchange Visitor Signature

Date