



J-1 Exchange Visitor Request Form

Student Information

All fields are required. Please write clearly.

First / Given Name	Last / Family Name	SEVIS Number N _____
Category <input type="checkbox"/> Intern <input type="checkbox"/> Professor <input type="checkbox"/> Research Scholar <input type="checkbox"/> Short-term Scholar <input type="checkbox"/> Student <input type="checkbox"/> Other: _____		
School	Program / Major (if student)	
Phone Number (____) _____ - _____	Email Address	

Request Type

Submit all required materials for your request with this form. Incomplete documents will delay processing time.

TRAVEL ENDORSEMENT

Complete this section if you would like a new travel signature on your Form DS-2019. Submit your original DS-2019 with your request.

Do you have a valid J-1 visa? <input type="checkbox"/> Yes <input type="checkbox"/> No	Is your passport valid for at least 6 months? <input type="checkbox"/> Yes <input type="checkbox"/> No
International Destination(s)	
Departure Date (mm/dd/yyyy)	Re-entry Date (mm/dd/yyyy)

NEW FORM DS-2019

- *Replace** lost, damaged, or stolen DS-2019
- *Add or change dependents**
- *Correct** or update information.

SEVIS RECORD

- Extend** current exchange program
- Transfer** to another institution in the U.S.
- *Intent to depart** the U.S. (University-approved Leave of Absence, withdrawal from program, etc.)

*(Required) Provide a brief explanation below:

EMPLOYMENT AUTHORIZATION

- Academic Training (AT)
- On-campus Employment

OTHER

- Additional documentation** for a pending request
- Social Security Number (SSN) **support letter** – on-campus employment only

UNDER-ENROLLMENT AUTHORIZATION

- Reduced Course Load (RCL)



DO NOT WRITE IN THIS SECTION – ISO Use Only

Advisor:

Date:

- SPAIDEN: _____
- SGASTDN: _____
- SOAHOLD: _____
- SFAREGQ: _____
- SHADEGR: _____
- SHACRSE: _____
- GOAINTL: _____