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Exchange Visitor Status

The purpose of the J-1 exchange visitor status is to increase mutual understanding between the people of the United States and the people of other countries by means of educational and cultural exchanges.

You have been invited by a representative of NDSU to participate in teaching or research activities. Your host department at NDSU will provide a supervisor for your research program and laboratory facilities for your use. The additional details of your research program—objectives, funding, and benefits—will be indicated via the department by way of an official invitation letter or contract.

***Note: Changes in activities and/or categories are not allowed after the visitor arrives in the US (ex: changing from Research Scholar to J-1 Student)**

Form DS-2019 (Immigration document)

Before you can obtain a J-1 visa, you must present a DS-2019 at your visa interview, which is provided by our office. In order to help expedite the issuance of Form DS-2019, it is essential that you include complete correct information and documentation as requested on the following form(s). If the information requested is not complete or is inadequate, issuance of the DS-2019 may be delayed. After your immigration record has been created, (1) you will receive a confirmation e-mail with your assigned SEVIS number and (2) **your NDSU host member will ship the documents to you.**

Medical Insurance

Our office is charged with the responsibility of ensuring that NDSU complies with all federal regulations set by the United States Department of State (DoS) Exchange Visitor Program. To ensure the safety and welfare of international scholars during their stay in the United States, it is **required by the DoS** that all institutions hosting an international scholar on a J-1 visa make certain that the **scholar and all family members have specific coverage by an approved health insurance policy.**

If you are a **non-benefitted exchange visitor** and medical insurance is not provided by your host department at NDSU, **we will assist you with the purchase of medical insurance upon arrival.** Non-benefitted medical insurance is offered through [United HealthCare \(UHC\)](#). **Other medical insurance policies will NOT be accepted.** (view rates at the UHC hyperlink)

Required Documentation that must be submitted

- Scholar Info Form
- Copy of passport photo/bio page (and passport pages of any J2 dependents)
- Curriculum Vitae (CV) or Resume
- Financial award notice (from government, home institution or employer)
- Proof of English proficiency (TOEFL, TOEIC, IELTS, Pearson's, transcript showing recent English courses, or statement from NDSU host)

List name according to the passport

Family Name (Last/Surname)

Given Name (First)

Middle Name

Birthdate (list month as a word)

Month

Date

Year

Gender

Male

Female

City of Birth

Country of Birth

**Country of
Citizenship**

**Country of Legal
Permanent Residence**

Complete Home Address (including apartment, city, province and country)

Primary e-mail address for correspondence

Current Position or Title

Your duties in current position

Name of Home University or Employer

Location (Province and Country)

Type of Business

University

Central Government

Regional Government

City/Town Government

Private Company

Other

Have you ever been to the US on another J-1 or J-2 visa?

- No Yes

If YES, provide dates AND submit copies of ALL previous DS-2019s

Have you ever been to the US in another non-immigrant status (B-visa, VWP, TN, etc.)?

- No Yes

If YES, provide status and date(s):

Funding/ Financial Support

- Visitor will be financially supported by his/her home institution or home government
 International Exchange Fellowship (ex: Fulbright, USDA, Borlaug, etc.)

\$ _____ x ____ months

NDSU Funding

- Visitor will be fully-funded by NDSU (employee or temporary hire)
 Visitor will be supplemented by NDSU (foreign government/institution + NDSU)

\$ _____ x ____ months

Medical Insurance (you must select each box indicating you will abide by each statement)

- I understand that I am required to carry U.S. health insurance for myself and my dependents as specified by the Exchange Visitor Programs of the U.S. State Department and available to me through North Dakota State University.
- I understand that North Dakota State University will help me obtain health insurance AFTER I arrive and no other health insurance plans will be accepted.
- I understand that the entire insurance premium is required at the time of my enrollment.

English Proficiency

The US State Department requires sponsors to use an "objective measurement of English language to determine a visitor's English proficiency" and file documentation.

- I will interview with my NDSU host (Skype, Telephone, Video-conference, In-person)
- I will submit test results from a US-recognized English language test (TOEFL, TOEIC, IELTS, Pearson's)
- I will provide evidence of recent coursework in English (taken within past 2 years) (ex: US diploma, US-taught courses)

Signature

Signature or Digital Signature

Date

If family members will accompany you **during your initial arrival**, please provide the following information and send copies of their passport photo/bio page. **If family members will visit at a later time, do not complete this page at this time.** If a family member

List all names exactly as they appear in the passport.

Dependent #1

Family Name

Given Name

Birth Date (list as a word)

Month

Day

Year

Gender

Male

Female

Relationship to J1 Exchange Visitor

Spouse

Son

Daughter

City of Birth

Country of Birth

Country of Citizenship

Country of Legal Permanent Residence

Email Address (If none, list that of J-1 applicant)

Has dependent visited US on another J1/J2 visa before?

NO

YES

Dependent #2

Family Name

Given Name

Birth Date (list as a word)

Month

Day

Year

Gender

Male

Female

Relationship to J1 Exchange Visitor

Spouse

Son

Daughter

City of Birth

Country of Birth

Country of Citizenship

Country of Legal Permanent Residence

Email Address (If none, list that of J-1 applicant)

Has dependent visited US on another J1/J2 visa before?

NO

YES

Dependent #3

Family Name

Given Name

Birth Date (list as a word)

Month

Day

Year

Gender

Male

Female

Relationship to J1 Exchange Visitor

Spouse

Son

Daughter

City of Birth

Country of Birth

Country of Citizenship

Country of Legal Permanent Residence

Email Address (If none, list that of J-1 applicant)

Has dependent visited US on another J1/J2 visa before?

NO

Yes

Dependent #4

Family Name

Given Name

Birth Date (list as a word)

Month

Day

Year

Gender

Male

Female

Relationship to J1 Exchange Visitor

Spouse

Son

Daughter

City of Birth

Country of Birth

Country of Citizenship

Country of Legal Permanent Residence

Email Address (If none, list that of J-1 applicant)

Has dependent visited US on another J1/J2 visa before?

NO

YES