

## Hosting an UG Student Intern

Please return via email to Faculty Immigration Services or return via campus mail at the address below

**Faculty Immigration Services** 

Old Main #201, Dept 2000

(701) 231-8052 (office)

(701) 231-1013 (fax)

As administrators of NDSU's J-1 Exchange Program, Faculty Immigration Services is charged with the responsibility of ensuring that NDSU complies with all federal regulations governing the US State Department's Exchange Visitor Program.

The purpose of the J-1 student intern program is to allow foreign **undergraduate students** an opportunity to gain exposure to U.S. culture and receive hands-on experience in U.S. business practices in their chosen occupational field.

\*Note: Changes in activities and/or categories are not allowed after the visitor arrives in the US.

#### **Program Duration and Focus of Activity**

- Internship must be full-time, minimum of 32 hours/week
  - Minimum duration of 3 weeks and maximum of 12 months
- Internship does not have to be in student's field of study, but must be required to "full the educational objectives for the student's current degree program at his/her home institution (abroad)
- All tasks must be "necessary for the completion of the student internship program"
  - Internship tasks cannot be more than 20% clerical work
- Internship must expose the student to "American techniques, methodologies and technology, expand student's existing knowledge and skills, and not duplicate student's prior experience
- Internship cannot displace an American worker; cannot "serve to fill a labor need"; must be work-based learning rather than ordinary employment

### Student Eligibility

Student must be primarily in the U.S. to engage in internship program-- rather than to engage in employment or provide services to an employer. [22 C.F.R. 52.23(i)}

- Undergraduate, currently enrolled and pursuing a degree at an accredited academic institution outside the U.S.
- Must be in good academic standing at his/her home institution, outside the U.S.
- Must return to his/her academic program to fulfill and obtain the undergraduate degree
- Must have verifiable English language skills

### **Medical Insurance**

Department of State regulations require all institutions hosting anyone in J-1/J-2 status to demonstrate that the J-status holder(s) have specific levels of health insurance coverage (including emergency medical evacuation and repatriation) under an approved health insurance policy.

Self-funded student interns at NDSU are required to purchased our non-benefitted student health plan offered through <a href="United HealthCare (UHC)">United HealthCare (UHC)</a>. Other medical insurance policies will not be accepted. (Access the hyperlink to see rates)



# Hosting an UG Student Intern Questions about this form? Contact (701) 231-8052

Program Begin Date	Program End Date		
Visitor Information			
Last/Surname First/Given Name  Detailed summary of the work that the visitor will participate in while at NDSU (25 words or less)			
Visitor's e-mail address			
Funding/ Financial Support  Visitor will be financially supported by his/ her home institution or home government	NDSU Funding  Visitor will be an employee of NDSU (salary)*  Visitor will receive a stipend from NDSU (self-funded + NDSU stipend)		
\$xmonths  The Training/ Internship Placement Plan (T/IPP, Form DS700 and signed by Student (e-mail copy to Faculty Immigration SOC)  Yes  No			

Federal regulations require all J1 visitors and their J2 dependents to have medical insurance coverage at specific levels				
O United Health Care (no	n-benefitted)			
Sanford Health Plan (be	enefitted)*			
*NORTH DAKOTA REGULATION: Benefits must be given to visitors who are paid by NDSU and work 20+ hours/week for more than 5 months. ("Benefits" include more than medical insurance.)  *SUPPLEMENTAL EMEGENCY MEDIVAC/REPATRIATION REQUIRED FOR BENEFITTED EMPLOYEES: The Faculty Immigration staff will assist employees with enrolling in this coverage after they arrive in the U.S.				
The US State Department r visitor's English proficiency	• •	n "objective measurement of E	inglish language to determine a	
Conducted an interview	(Skype, Telephone, Video	o-conference, In-person)		
☐ Visitor will provide resul	ts from a US-recognized E	English language test (TOEFL,	TOEIC, IELTS, Pearson's)	
Visitor will provide evidence of recent coursework in English (taken within past 2 years)				
		nolar Visiting Researcher (VS/\subseteq SU.exportcontrols@ndsu.edu.	/R) form has been completed and Contact (701) 231-6455 for help	
0 100 0 110				
Visiting Scholar Visiting Res	earcher (VS/VR) Form			
Signatures		1		
HOST Faculty Member		Department Chair/	lead/Director	
Printed Name		Printed Name		
(digital) Signature		(digital) Signature		
Phone	 Date	Phone		

Return the following documents to Faculty Immigration Services:

Signed Host form

**Medical Insurance** 

- Copy of invitation letter (on department letterhead with an original signature)
- Completed Training Plan (Form DS7002), signed by both Host and student)
- English proficiency statement
- Copy of the fully executed Visiting Scholar Visiting Researcher (VS/VR) form (if not previously provided)