DS-2019 Request Form for J-1 Visiting Scholar

**DIRECTIONS:** All sections of this form must be **completed by the department**, NOT Visiting Scholars, and must be **accompanied by an offer letter** stating the specific terms of the appointment. The letter must include salary, dates of the appointment, and any other information relative to the situation. Requests will not be processed without an offer letter.

The information provided will be used to generate a form DS-2019, the document used to obtain a J-1 visa from a US consulate and used as evidence of J-1 status while in the US.

**Section One: Scholar Personal Information**

*(Please write the name exactly how it appears on the passport AND please attach a copy of the Passport ID page)*

Family/Last Name:  
Given/First Name:  
Middle Name:  
Sex:  
☐ Male  ☐ Female  
Date of Birth:  
Month  Day  Year

City and Country of Birth:  
Citizenship:  
Mailing Address with Postal Code:  
Legal Permanent Address:  
Telephone number:  
Fax Number:  
Email Address:  

**Current Occupation in Home Country:**  
*(If Student, please specify Graduate or Undergraduate)*

Job Title:  
☐ Government  ☐ Civilian  
☐ Central  ☐ Regional  ☐ Local

Job Responsibilities:  

Name and Address of Home Employer:  

Will the scholar be visiting at any other institution(s) in the US before or after their visit to UD?  
☐ Yes  ☐ No  
If yes, please explain
Section Two: Visa History

Has the Visiting Scholar previously been in U.S:  ☐ Yes  ☐ No  U.S Social Security Number (if known):

If yes, please specify all dates: (please attach sheets if more space is required)

Type of Visa Held  From  To  If other than W/B, B-1, W/T, B-2, who sponsored visa?

(If Visiting Scholar was previously in U.S. on J1/J2 visa, please attach all copies of precious IAP-66/DS-2019 forms. If not available, please attach a letter from the Visiting Scholar stating information on category and dates of previous visits.)

Section Three: English Proficiency

As of January 5, 2015, the US Department of State requires sponsors to verify that each exchange visitor is sufficiently proficient in English. Additional information about how to establish language proficiency is available on our website at http://www.udel.edu/oiss/departments/hosting_J1.html.

Is the visitor sufficiently proficient in the English language to successfully participate in  ☐ Yes  ☐ No his or her program?

If yes, please indicate how proficiency was established (select one of the three options & provide details):

<table>
<thead>
<tr>
<th>☐ English Language Test</th>
<th>Test Name:</th>
<th>Score:</th>
<th>*Attach copy of score report</th>
</tr>
</thead>
<tbody>
<tr>
<td>☐ Signed documentation from an academic institution or English Language School</td>
<td>Institution Name:</td>
<td>*Attach copy of documentation</td>
<td></td>
</tr>
</tbody>
</table>

☐ Interview by Department or ☐ Interview by ELI

☐ In-person  ☐ Video-conference  ☐ Telephone (if video-conference not a viable option)  Name and title of interviewer:

Date of Interview:

*Attach copy of documentation
### Section Four: Project Information

| Department: |  |
| Faculty Member or Supervisor: |  |
| Telephone number: | Fax Number: |
| Email Address: |  |

| Project type: |  |
|  | ☐ Public domain |
|  | ☐ Gov’t Restricted Access |
|  | ☐ Classified |
|  | ☐ Non-Gov’t Restricted Access |
|  | ☐ Other, please specify___________________________________________________ |

| Category of Visiting Scholar: |  |
| ☐ * Short-Term Scholar (6 months limit. No extension) | ☐ * Research Scholar (5 years limit.) |
|  | ☐ * Specialist (1 year limit. No extension.) |
|  | ☐ **Professor (5 years limit.) |

**IF Short-Term Scholar, Research Scholar, or Specialist**

| Project title or field of study: |  |
| **IF Professor** |  |

| Class(es) being taught: |  |

| Is this position a tenure track position? |  |
| ☐ Yes | ☐ No |

| If so, would this individual be considered for the position? |  |
| ☐ Yes | ☐ No |

| Visiting Scholar’s dates of appointment |  |
| From | To |

| Visiting Scholar’s primary responsibility |  |
| ☐ Research | ☐ Teaching |
| ☐ Other (Please specify) |  |
Section Five: Funding Information

Required funding as of 4/1/15:

Per Year: $15,000 per scholar, $5,000 per dependent spouse, $3,000 per dependent child

E.g. for a family of three (scholar + spouse + child) funding must be at least $23,000 per year

During the period covered by this form, it is estimated that the following financial support will be provided to this Visiting Scholar by:

A) ☐ University of Delaware $

   If UD has received funding to specifically support this visitor from U.S Government Agency (such as NSF, FDA, or NIH) or International Agency (such as NATO), list agency, and indicate $ amount received from each agency.

   Agency: $

   Will the Visiting Scholar be the principal investigator on this project? ☐ Yes ☐ No

B) ☐ U.S Government – Agency: $

C) ☐ Visitor's Government $

D) ☐ Personal Funds (Bank Statement needed) $

E) ☐ All other organizations $ $

Any additional information:

Section Six: HR & Payroll Onboarding

Will the Visiting Scholar need to be in the Payroll System?

** Please note that only on-boarded scholars are permitted to obtain a UDID card for access to University facilities. Scholars who may need to use the Library or other facilities on campus should be on-boarded even if they are not being paid. **

☐ Yes (a checklist will be included in the DS-2019 packet explaining how to create their UD ID number and online)

☐ No (a UD ID number will be created by OISS and a Temp SSN, if needed, when they check-in with our office)
Section Seven: Dependent Information

*Please attach a copy of each dependent’s passport*

If spouse and/or children will accompany the Visiting Scholar and require a J-2 visa, please give the following information on each additional person:

<table>
<thead>
<tr>
<th>Name (LAST, First, Middle)</th>
<th>Relationship (spouse, child)</th>
<th>Date of Birth (MM/DD/YYYY)</th>
<th>City and Country of Birth</th>
<th>Country of LEGAL PERMANENT RESIDENCY</th>
<th>Country of CITIZENSHIP</th>
<th>E-mail Address IF over 14 years of age</th>
</tr>
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Section Eight: UD International Service Fee

Please check if the Department ☐ or the Visiting Scholar ☐ will pay the $100 fee.

(If the Department, please attach a Department Fee Payment Form with the packet. If the scholar will pay, please remind them to bring $100 cash or money order when they check-in with our office.)

Section Nine: Authorization

Name of the person completing form: ________________________________ Email: ________________________________
Phone: _________________________ Signature: ________________________________ Date: _________________________

Approval/ Department Chairperson:
CHECKLIST: The complete request packet should include all the following:

**Required for all requests**

☐ DS-2019 Request Form for J-1 Visiting Scholar

☐ Copy of Passport ID Page for J-1 Visiting Scholar (and J-2 dependents, if applicable)

☐ Visa information for previous visits (all copies of previous DS-2019 forms, or letter from Visiting Scholar)

☐ UD Offer letter (with terms of appointment)

☐ Export Control Certification for J-1 Visiting Scholars (must be signed by the Research Office before submitting to OISS)

**If language proficiency not verified by interview**

☐ Documentation of English proficiency (test score report or signed documentation from an academic institution or English Language School)

**If funding from source other than UD**

☐ Proof of funding

**If department is paying the $100 UD International Service Fee**

☐ Authorization for Department Fee Payment Form

**MAILING INSTRUCTIONS:**

☐ Regular Airmail

☐ Express Mail (completed international air bill must be attached)

☐ Pick up (Name: [ ] email: [ ])

*Please return the complete request packet to:*

Office for International Students and Scholars – J-1 Request
44 Kent Way
Newark, DE 19716-6410
Tel: (302) 831-2115
Fax: (302) 831-2123
Email: oiss@udel.edu