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|  | DS-2019 Request Form for International Scholars(Updated 7/01/2015) Please return completed form to the Global Education Office (GEO) MSC06 3850,  phone 277-4032, , fax 277-1867 |

Please provide the following information to enable GEO to prepare a DS-2019 for the scholar seeking permission to enter the U.S. with J-1 Exchange Visitor visa status. There is a $200 administrative services fee for each new scholar, and a $50 fee for extensions. **This form must be filled out by the hiring department and not by the Exchange Visitor**U**. However scholars are allowed to complete the personal information portion of this form.**

**Please type or print this form to ensure accuracy on DS-2019.**

The Visitor will: ( ) begin a new program

( ) extend J-1 status (for those at UNM only)

( ) transfer to UNM from another U.S. institution (include required documents in personal information section)

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| **Personal Information - to be completed by the Scholar- Attach copy of passport biographical page**  Family Name: First Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_ Middle Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ( ) Male ( ) Female  Born (mm/dd/yyyy) \_\_\_\_\_/ \_\_\_\_\_/ \_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country:  Month Day Year  Legal permanent resident of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Citizen of:  U.S. Social Security Number (if any) \_\_\_\_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_  Present Residential Address (outside the U.S.):  UCity: Province: Postal Code: Country: U    Position in home country: e-mail:  Is the Exchange Visitor already in the U.S. at another institution? \_\_\_\_yes \_\_\_\_no  Has the Exchange Visitor ever been in the U.S. in J status during the last six years? \_\_\_\_yes \_\_\_\_no  *If you answered yes to either question, please provide copies of any previous U.S. immigration documents (e.g., I-20, DS-2019, U.S. visa, I-94, etc.)*  **Dependent Information - to be completed by the Scholar - Attach copy of passport biographical page for each dependent**   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **If the Exchange Visitor plans to bring dependents** (spouse or unmarried minor children under the age of 21), who will be requesting J-2 dependent immigration status, please complete the following table even if family members will be entering the U.S. separately from the visiting scholar. We will prepare a separate DS-2019 for each dependent. If more than 3 dependents please attach additional information. **Remember that** **a minimum of $1500 for scholar, $500 for spouse, $200 for each child per month is required.**   |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | | Family Name | Given Name | Relationship to Scholar | Gender | Date of Birth  mm/dd/yyyy | City and Country of Birth | Country of Citizenship | Country of  Legal Residence | E-Mail Address  **(Required for each Dependent)** | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |  |  | | |

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| **Program Information- to be completed by the sponsoring department**  Dates of appointment (mm/dd/yyyy): \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_ to \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ (5-year maximum, must include time spent at previous institutions for transfers) Month Day Year Month Day Year  **Category of Exchange Visitor:**  1. ( ) Research Scholar (6 months to 5 years) - possibility of an extension up to 5 years  2. ( ) Short –term scholar (6 month maximum) - no possibility of an extension after 6 months  3. ( ) Professor (Cannot be a tenure-track position)  4. ( ) Specialist (3 weeks up to 1 year)  Primary academic discipline of Exchange Visitor while working at UNM:  Non-technical description of UNM appointment: (will appear on DS-2019)  Explain how the purpose of scholar’s stay is connected to your department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (i.e., using UNM libraries/facilities for research project; collaborating with researchers in our department; post doc hire, etc.)  Please describe any social or cultural opportunities that the department will provide to the scholar (if any)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Financial Information**  Source and total amount of exchange visitor’s financial support for the period above. **A minimum of $1500 for scholar, $500 for spouse, $200 for each child per month is required.**  Attach documentation of financial support from any source other than University of New Mexico administered funds. All employment-based appointments, including stipends for living expenses, must be arranged through the appropriate Employment Data Center (e.g. Faculty Contracts, Human Resources) prior to a new program or transfer from another institution. UPlease be aware that UNM hiring procedures may require a “Request to Deviate From Prescribed Search Process” in connection with the hiring of the visitor. If this is required for the visitor you are inviting please contact the appropriate Employment Data Center (EDC.)  Funds from or administered by UNM: $  (Source of Funding)  Exchange visitor’s government (Attach Documentation) $  Other organizations (Attach Documentation) $  Personal funds, including sabbatical leave (Attach Documentation) $  Documentation for personal funding can consist of a personal statement from the visitor accompanied by a bank statement or University letter regarding sabbatical leave, etc.  **IMPORTANT TAX INFORMATION**. Please inform Exchange Visitors that any allowances for housing, travel, insurance, etc. and all wages are subject to U.S. taxes.  ­­­­­­­­­­­­­­­  **Health Insurance Information**  The cost of **health and accident insurance** will be paid by: (\_\_\_\_\_) Department or (\_\_\_\_\_) Visiting Scholar  If health insurance is defrayed by the department Banner Index# to be charged \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Dates of coverage for health insurance \_\_\_\_\_/ \_\_\_\_\_/ \_\_\_\_\_ thru \_\_\_\_\_/ \_\_\_\_\_/ \_\_\_\_\_  Month Date Year Month Date Year  The department must establish who will pay the cost of federally mandated health and accident insurance for the scholar and dependents with the following coverage:  **$100,000** per accident or illness;  **$50,000** for medical evacuation of the exchange visitor to his or her home country  **$25,000** for repatriation of remains- UNM employees with Presbyterian or Blue Cross Blue Shield health insurance should carry a supplemental plan to meet this requirement. Currently these plans only cover $7,500.  No more **than $500** deductible per accident or illness.  **Program Information- to be completed by the sponsoring department**  This form must be signed by the department dean, director or chair. It must be sent to GEO as soon as the Exchange Visitor’s plans are known, preferably 12 weeks before the scholar’s expected arrival date. U**GEO will complete the DS-2019 within 3 weeks after receiving the request.** The University assumes responsibility in undertaking sponsorship for an Exchange Visitor. The Global Education Office (GEO) depends on departments to provide complete and accurate information about their Exchange Visitor and his/her funding. We, in turn, are responsible for guaranteeing this information to the U.S. government.  **I accept the responsibility for the accuracy of the information provided on this form, for sponsoring the scholar at the University of New Mexico, for facilitating communication between the scholar and GEO including release time for** U**mandatory GEO orientation, and for reporting to GEO the termination and/or departure of the scholar from the University. I agree to notify GEO immediately if the scholar**  **leaves or is terminated more than 2 weeks before the end date on the DS-2019, The mandatory Orientation is held every Wednesday from**  **10 am until 12 pm in the GEO office.**  Requesting Department:  Department Address:  **If this scholar will conduct research/teaching at a site other than UNM main and north campuses (including any anticipated temporary research/teaching off campus), please specify:**  Name and Address: \_\_\_\_\_\_\_\_\_ City: State: ZIP Code:  Dates at site (if not at an off-campus site for the duration of the appointment): Start: \_\_\_\_\_\_\_\_\_\_\_\_ End: \_\_\_\_\_\_\_\_\_\_\_  Reason for off-campus activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Remember: off-campus site of activity MUST be approved by GEO prior to the issuance of the DS-2019.**  J-1 Scholar Coordinator at Dept.: Phone: e-mail:  Scholar’s direct supervisor: Phone: e-mail:  **Department Banner Index to be billed (Mandatory):**  (A **$200** fee will be billed to your account, **$50** for extensions)  U*NOTE*U*: Please verify the correctness of the index number with your department accountant.*    Dean, Director or Chair (typed) Signature Date |

**\*\*\*Pick Up Information\*\*\***

The Global Education Office will contact the requesting department scholar coordinator to pick up the DS-2019 when it is ready. The completed DS-2019 will be at our front desk under the **scholar coordinator’s last name, NOT the scholar's name**.

**THIS FORM MUST BE ACCOMPANIED BY THE SIGNED LETTER OF DEPARTMENTAL RESPONSIBILITIES**

Send entire application forms by scan and email to [iadvisor@unm.edu](mailto:iadvisor@unm.edu) or by mail to: University of New Mexico

Global Education Office

MSC 06 3850

Albuquerque, NM 87131

**\*\*\*\*Global Education Office Purposes Only\*\*\*\***

Paper work submitted to GEO Administration \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Submitted by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_

Department Charged (JV#) \_\_\_\_\_\_\_\_\_\_\_\_\_



**Global Education Office (GEO)**

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Phone (505) 277-4032 ♦ Fax (505) 277-1867

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# DEPARTMENTAL RESPONSIBILITIES FOR SPONSORING J-1 INTERNATIONAL SCHOLARS

(For UNM departments who wish to bring international scholars to UNM as J-1 Exchange Visitors)

Immigration regulations mandate that U.S. universities and colleges that sponsor international scholars must report exchange visitor information to the Department of Homeland Security and the U.S Department of State.

Each department sponsoring an exchange visitor is responsible for the following:

* Attesting to sufficient proficiency in English.
* Providing a MINIMUM of two months lead time in preparing paperwork for new visiting scholars. Scholars may need up to 6 months to secure a J-1 visa and arrive at UNM)
* Ensuring accuracy of the information provided on the DS-2019 Request Form.
* Informing GEO immediately if the scholar, decides to arrive earlier or later than stated on the DS-2019 form, or cancels their proposed appointment at UNM
* Ensuring the scholar’s prompt attendance at the mandatory GEO orientation (within 10 days of arrival)
* Providing support to the scholar during their research/teaching at UNM
* Communicating immediately with GEO regarding information about the scholar’s appointment at UNM which includes the following events: the arrival, departure and/or termination of the scholar from UNM, changes in the scholar’s US address, and any program change in the scholar’s appointment
* Informing GEO at least one month before the expiration date on a current scholar’s DS-2019 form about any extension requests
* Informing GEO immediately prior to early termination of the exchange visitor program in the department (if leaving more than 2 weeks prior to end date)
* Informing GEO about any prospective non-UNM paid engagements that the scholar wishes to participate in (so that GEO can authorize such employment in advance if the scholar meets the immigration requirements)

**DEPARTMENT ATTESTATION OF ENGLISH PROFICIENCY**

**FOR J-1 EXCHANGE VISITORS**

Effective January 5, 2015, the U.S. Department of State requires sponsors of J-1 exchange visitors to demonstrate proof that the J candidate has "sufficient proficiency in the English language, as determined by an objective measurement of English language proficiency, to participate successfully in his or her program and to function on a day-to-day basis." [22 CFR 62.11(a)(2)]

All requests for inviting new J-1 exchange visitors to UNM must be accompanied by this “Department Attestation of English Proficiency for J-1 Exchange Visitors” form in order for the Global Education Office (GEO) to issue the DS-2019 Certificate of Eligibility for the J-1 Status.

**DEPARTMENT ATTESTATION**

I confirm that the J-1 candidate has demonstrated sufficient English proficiency in one or more of the following ways (as deemed to be appropriate by the Department of State and GEO):

* A documented interview conducted in English by the sponsor either in-person or by videoconferencing, or by telephone if videoconferencing is not a viable option

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| **INTERVIEW INFORMATION** | **ASSESSMENT** |
| Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time \_\_\_\_\_\_\_\_\_\_\_\_\_  Interviewer Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Interviewer Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  J-1 Interviewee Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | J Scholar English Proficiency level   * Proficient * Not Proficient   \*If the Exchange Visitor arrives with no English proficiency, the J-1 program will be canceled. |

**OR**

* The TOEFL or IELTS taken with a minimum score for activity of daily life.
* TOEFL 🞏 IELTS 🞏CET 🞏 Score \_\_\_\_\_\_\_\_\_\_\_\_

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| **Test Type** | **Minimum Score** |
| **TOEFL Paper Based** | **379** |
| **Internet Based TOEFL** | **25** |
| **IEFLTS** | **4** |
| **Chinese English Test** | **290** |

**OR**

* Documented completion of advanced level English proficiency from a recognized English language institution OR copy of transcripts from a university in an English-speaking country (please attach copy of documentation)

I, the undersigned, understand and agree to comply with the above outlined responsibilities.I hereby attest that the prospective exchange visitor possesses sufficient proficiency in the English language to participate in his or her program. This means they proficient English to perform their job, navigate daily life in the United States, read and comprehend materials, understand fully their responsibilities, rights, and protections, and how to obtain assistance. The department assesses sufficient English proficiency through one of the following objective measurements.

Scholar’s direct supervisor (typed) Signature Date

Name of Dean, Director or Chair (typed) Signature Date