

J-1 Exchange Visitor Data Form

Instructions: This form is to be completed by the J-1 Exchange Visitor and returned to the host department at YSU for submission with a complete Department Request for J-1 Exchange Visitor Application. **Every** field is to be filled completely and accurately as it is required for issuance of the DS-2019. Do NOT enter "NA" in any field.

You must also include a copy of the picture page of your passport as well as for all accompanying family member(s).

Family Name: _____ **First & Middle Name:** _____

Date of Birth (mm/dd/yy): _____ **Gender:** M F **Marital Status:** Single Married

City of Birth: _____ **Country of Birth:** _____

Country of Citizenship: _____ **Country Legal Permanent Residence:** _____

Highest level of education completed: Doctorate Master's Bachelor's Other _____

Date degree awarded (mm/dd/yy): _____

Current level of education (if applicable): Doctorate Master's Bachelor's Other _____

Date degree awarded (or expected to be awarded) (mm/dd/yy): _____

Most recent position/occupation or title in your HOME country: _____
(ex: student, teacher, employee, self-employed, etc.)

Name of school/institution/employer from above: _____

Home country residential address: _____

City: _____ **State/Province:** _____ **Country:** _____

Postal Code: _____ **Email Address:** _____

Signature: _____ **Date:** _____

Required Proof of Financial Support

Proof of sufficient financial support is required for the entire duration of the visit before an immigration document can be issued. Documentation of at least **\$15,864 per year (\$1,322 per month)** is required. If family members will accompany the visitor, an additional **\$7,500 per year (\$625 per month)** for the spouse and **\$5,000 per year (\$417 per month)** per child must be documented.

NOTE: Supporting financial documents must: **1)** be in English, **2)** be dated less than 6 months from date of submission, and **4)** clearly state the name of the account holder and the amount of funding available in U.S. dollar equivalent. Foreign currency will be converted upon review of the forms if necessary. If receiving YSU department support, attach a copy of the offer/invitation letter. For institution, employer or home government support, submit original letters on official letterhead clearly detailing the time period to be covered and the total amount of support offered. If using personal funds, submit bank statements/certificates. If receiving family support, provide a letter from the sponsor stating the amount to be provided and bank statements/certificates.

Are you currently in the U.S.? No Yes **If yes, state your current visa status*:** _____

* Submit copies of your current immigration documents (I-20, DS-2019)

Have you previously been in the U.S. as a J-1 Exchange Visitor? No Yes

If yes (above), complete the following and submit a copy of **all** previous DS-2019 immigration documents.

Previous J-1 Program 1: Dates from _____ to _____

Purpose of visit (student, researcher, etc) _____

Visa Sponsor (university, Fulbright, etc) _____

Previous J-1 Program 2: Dates from _____ to _____

Purpose of visit (student, researcher, etc) _____

Visa Sponsor (university, Fulbright, etc) _____

Have you ever applied for a waiver of the two-year home residency requirement? No Yes

If yes, have you received any official (USCIS, DOS) notification regarding this application? No Yes

Complete the following section only if your family members will accompany you to the U.S. and will require a J-2 visa. Include a copy of the picture page of the passport for each member.

Dependent 1

Dependent Family Name: _____ First Name: _____

Date of birth: _____ Relation to you: Spouse Son Daughter

City & Country of birth: _____

Country of Citizenship: _____ Country of Permanent Residence: _____

Dependent's email address: _____

Dependent 2

Dependent Family Name: _____ First Name: _____

Date of birth: _____ Relation to you: Spouse Son Daughter

City & Country of birth: _____

Country of Citizenship: _____ Country of Permanent Residence: _____

Dependent's email address: _____

This form may be copied as needed for additional dependents.