

# Request Form for J-1 Scholar Immigration Document - DS-2019

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(Please TYPE all information – if you cannot type in the PDF online there should be an “open with a different viewer” option)

**NOTE:** DO NOT SEND THIS FORM TO THE PROSPECTIVE VISITOR. COLLECT THE INFORMATION REQUIRED THROUGH VITA, RESUME OR FOLLOW-UP CORRESPONDENCE.

## Checklist – Completing the Request Form for a DS-2019

**Step 1** – Review, “What You Need to Know Before You Invite a Scholar to Binghamton University”

(<http://www.binghamton.edu/iss/faculty/ds.html>)

**Step 2** – Information you need to receive from the scholar to complete the request form:

- Copy of the scholar’s passport ID page
- If dependents are also coming with scholar, a copy of each dependent’s passport ID page
- Funding letter for scholar, or financial documents showing enough support for them
  - \$1400.00 US dollars/month for scholar
  - \$600.00 US dollars/month for spouse
  - \$400.00 US dollars/month for each child
- Copy of scholar’s Curriculum Vitae

**Step 3** – Before we can process the DS-2019, the academic department must provide:

- The items above that you received from the scholar
- Letter of Invitation from the Dean’s Office
- This Request Form with all required administrator signatures (Items 22-24 below)

**Step 4** – Arrange a B-number for the scholar. If the scholar is unpaid:

<https://www.binghamton.edu/human-resources/hr-masters-and-coordinators/volunteers.html>

## ITEMS 1 – 4 MUST MATCH PASSPORT

Name of visitor

1. First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_ 2.  Male  Female

3. Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_ mm dd yyyy 4. Birth city \_\_\_\_\_ Birth country \_\_\_\_\_

5. Purpose of this request (please choose only one):  
 original  family's entry  
 extension  transfer from another J-1 program  
 replace lost form

6. Visitor previously at Binghamton University?  yes  no

7. Visitor's U.S. social security number (if previously issued) \_\_\_\_\_

8. If the visitor has previously been in J-1 status in the United States, at Binghamton or elsewhere, please provide the following information:

J category (e.g. student, scholar, professor) \_\_\_\_\_

Name of College or University \_\_\_\_\_

Start Date of Stay: \_\_\_\_\_ (mm/dd/yyyy) End Date of Stay: \_\_\_\_\_ (mm/dd/yyyy)

9. Country of citizenship \_\_\_\_\_ E-Mail \_\_\_\_\_

10. Country of legal residence \_\_\_\_\_

11. Current legal address (U.S. address, if applicable) \_\_\_\_\_

12. Address abroad to which visitor will return \_\_\_\_\_

13. Job title in home country (be specific) \_\_\_\_\_

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14. Place of employment in home country (university, government institution, private business)

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15. Field of specialization visitor will pursue with YOUR department here at BU. Please be as specific as possible (e.g. Chemistry Department - electro analytical chemistry):

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16. Title of visitor at Binghamton (please choose only one):

- Visiting (assistant, associate) Professor
- Visiting Research Scholar, Research Associate or Specialist
- Visiting Short-term Scholar (less than 3 weeks to a maximum of 6 months. See instructions)
- Other (specify) \_\_\_\_\_

17. Dates of appointment (The initial date is the date by which the visitor must enter the United State):

From \_\_\_\_\_ (mm/dd/yy) To \_\_\_\_\_ (mm/dd/yy)

18. Source and amount of financial support:

Source

Amount

A) University

a. State Payroll \_\_\_\_\_

b. Research Foundation \_\_\_\_\_

B) Direct funding from: (official documentation of funding other than Univ support must accompany this request form)

a. \_\_\_\_\_

b. \_\_\_\_\_

c. Personal Funds (ie: bank statement) \_\_\_\_\_

19. Will your dept/program charge a fee to this scholar/faculty member affiliate with you? \_\_\_\_ YES \_\_\_\_ NO

If yes, what is the amount of the fee?: \$ \_\_\_\_\_ (This information is needed to compute costs)

20. ISSS charges an administrative fee for all International Research Scholars and Faculty on J-1 visas. The fee amount may be found at <http://www2.binghamton.edu/iss/faculty/dsmem.html> **Check one choice below:**

\_\_\_\_ The visitor will pay the administrative fee. OR \_\_\_\_ Please send me an invoice for the administrative fee.

21. The following family members: \_\_\_\_ will accompany visitor -or- \_\_\_\_ will join visitor after arrival

## **ITEMS MUST MATCH PASSPORT - MUST BE A LEGAL DEPENDENT**

First Name / Middle Name / Last Name	Relationship	DOB: mm/dd/yyyy	City and Country of Birth	Country of Citizenship
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

22. If transferring from another U.S. institution:

Name of current program sponsor: \_\_\_\_\_

Address: \_\_\_\_\_

Date of visitor's initial entry to U.S. on J-1 visa: \_\_\_\_\_ Expiration date of current DS-2019: \_\_\_\_\_

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23. English Language Proficiency: The U.S. Department of State requires prospective exchange visitors possess "sufficient proficiency in the English language, as determined by an objective measurement of English language proficiency, successfully to participate in his or her program and to function on a day-to-day basis." [22 CFR 62.11(a)(2)]

Check One:	Indicate How Department has certified English language Proficiency for the prospective Exchange Visitor:	
<input type="checkbox"/>	<b>Certification by a recognized English language test</b>	<b>Attach copy of certified test score</b>
<input type="checkbox"/>	<b>Certification by an academic institution or English language school</b>	<b>Attach copy of official letter:</b> <ul style="list-style-type: none"> <li>• Verifies the exchange visitor possesses English language proficiency high enough to function daily within the Binghamton University position and within the local U.S. community.</li> <li>• Issued on letterhead in English within the past 12 months.</li> <li>• Printed on official letterhead and Includes signature from school official</li> </ul>
<input type="checkbox"/>	<b>Certification by the Sponsoring Professor (signature required in right column)</b>	<p>Name and Title of Interviewer (Print): _____</p> <p>Date of Interview: _____</p> <p>Duration of Interview: _____ minutes</p> <p>The Interview Was Conducted:</p> <p><input type="checkbox"/> In person</p> <p><input type="checkbox"/> By Videoconference</p> <p><input type="checkbox"/> By Phone</p> <p>Interview Notes (required):</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>I declare under penalty of perjury that I have interviewed the prospective exchange visitor, and I have verified that the scholar's English language proficiency is sufficient to function daily within their position and within the local U.S. community</p> <p>Signature: _____ Date: _____</p>

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24. Faculty member requesting DS-2019:

Name (print): \_\_\_\_\_ Signature: \_\_\_\_\_

Title/Dept: \_\_\_\_\_

Date: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

25. Approval of Department Chair:

Name (print): \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_ (mm/dd/yy)

26. Approval of Dean, Vice-President or Designee:

Name (print): \_\_\_\_\_ Signature: \_\_\_\_\_

Title: \_\_\_\_\_ Date: \_\_\_\_\_ (mm/dd/yy)

27. **Please choose only one option to receive the documents:**

department pick-up (dept pays for express mail - most used option) Call/Email: \_\_\_\_\_

scholar pick-up (mostly used for extensions) Call/Email: \_\_\_\_\_

**Express mail can only be arranged after the DS 2019 is ready.**