

Last Name: \_\_\_\_\_ SSN: \_\_\_\_\_  
First Name: \_\_\_\_\_ PID: \_\_\_\_\_  
Visa Type: \_\_\_\_\_



UNIVERSITY OF CENTRAL FLORIDA  
INTERNATIONAL SERVICES CENTER

## DS-2019 Request Form

Today's Date: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

### Purpose

☐ New program ☐ Extension of ongoing program ☐ Transfer from another program ☐ To be used by dependent(s)

\* J-1s are not allowed to hold tenure tracks.

Have you been on J-1 status before? ☐ Yes ☐ No If yes, when: \_\_\_\_\_ How long: \_\_\_\_\_

### Employment

Will you be employed by UCF? ☐ Yes ☐ No

\* If you answered yes to this question, please contact the Employment Office at ISC: (407) 823-1851 to process payroll paperwork.

### Applicant Information

Name (as it appears in passport) Please Print.

Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_ Suffix: \_\_\_\_\_

### Other Information

Date of Birth (MM/DD/YYYY): \_\_\_\_\_ Gender: ☐ Male ☐ Female

Country of Birth: \_\_\_\_\_ City of Birth: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_ Country of Permanent Residency: \_\_\_\_\_

Position in country of residence (Please specify)

(student, manager, professor, etc.): \_\_\_\_\_

### Immigration Documentation

Provide readable copies of the following documents if you are or have been in the United States.

- ☐ All copies of past IAP-66s or DS-2019s
- ☐ Passport
- ☐ I-94
- ☐ Visa
- ☐ Transfer Clearance Form (applicable to J-1 transferring from other U.S. institutions)

**Note:** Exchange visitors must provide proof of health insurance upon arrival at UCF. Insurance must be purchased at least one month before coming to the United States.

Last Name: \_\_\_\_\_ SSN: \_\_\_\_\_  
First Name: \_\_\_\_\_ PID: \_\_\_\_\_  
Visa Type: \_\_\_\_\_

## University of Central Florida—International Services Center

### DS-2019 Request Form

#### Department Information

Program Beginning Date: \_\_\_\_\_ Program Ending Date: \_\_\_\_\_

Department or program you will be associated with: \_\_\_\_\_

Department Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Describe in nontechnical terms what you will study, teach, or research: \_\_\_\_\_

Name of professor that the applicant will work with: \_\_\_\_\_ Professor's office phone: \_\_\_\_\_

Visitor's field of specialization: \_\_\_\_\_

Hosting Department Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

Hosting Department Name (of person signing): \_\_\_\_\_ Title: \_\_\_\_\_

\* J-1 students and scholars are required to purchase health insurance at least one month prior to their arrival at UCF.

#### Exchange Visitor Category

(Specify the J exchange visitor category. For a description visit our website at [www.intl.ucf.edu](http://www.intl.ucf.edu).)

- ☐ Research Scholar  
☐ Student (must be admitted by UCF prior to issuance of DS-2019)  
☐ Professor  
☐ Short-term Scholar  
☐ Specialist

#### Dependent Information

Does the applicant have dependents he/she would like to add to their DS-2019? ☐ Yes ☐ No

Financial requirement for each dependent is U.S. \$3,000.00. Type names as they appear in passport.

Name	Nationality	Relationship (spouse or child only)	Birthplace (City, Country)	Birthdate

Last Name:	SSN:
First Name:	PID:
Visa Type:	

## University of Central Florida—International Services Center

### Sponsoring Department Responsibilities Contract

#### Sponsoring Department Responsibilities

1. It is the responsibility of the sponsoring department to bring/send the J scholar to the International Services Center upon arrival at UCF. ISC is required by law to collect immigration documents along with proof of health insurance.
2. It is the responsibility of the sponsoring department to contact the International Services Center when an exchange visitor will be delayed in arriving at UCF, has left the country or has completed his or her work with the department.
3. It is the responsibility of the department to contact the International Services Center 45 days prior to the completion of a visitor's program if the department wishes to request an extension to the visitor's stay (Note: Department of State requires that all extensions processed by them must be submitted 90 days before the program expires). A new DS-2019 request form along with supporting documents must be submitted.

#### Sponsoring Department Services to J Scholars

1. Designate a contact person in your department and provide his or her phone number and email address to facilitate communications and arrangements for the visitor.
2. Locate and reserve an office or laboratory space for the visitor.
3. Arrange use of computer, email access and library (scholars will receive a PID from ISC).
4. Arrange secretarial and other essential support.
5. Send specific information about your department, as well as projects and responsibilities that the scholar will have.
6. Provide a list of apartments/houses available for scholars (information about housing can be found at the "Survival Guide for International Students and Scholars" available at [www.intl.ucf.edu](http://www.intl.ucf.edu)).
7. Have a list of interpreters available in case your exchange visitor needs some assistance in understanding English, as well as U.S. and university cultures.

Hosting Department Name: \_\_\_\_\_ Date: \_\_\_\_\_

Hosting Department Representative Signature: \_\_\_\_\_

Hosting Department Representative Print Name: \_\_\_\_\_