



Please complete the following information about yourself. You will also need to submit the following items to the University of Michigan department hosting your J-1 program:

- 1. This information form completed and signed
- 2. A copy of a passport picture page for the J-1 exchange visitor and J-2 dependents (if any)
- 3. Financial documentation of all non-University of Michigan funding sources
- 4. If you have held J-1 or J-2 status in the past two years: Legible copies of all DS-2019, J-visa and latest I-94 card (front side only)
- 5. If you are currently in the U.S.: Copies of your current immigration documents (latest I-94, visa, I-20 or DS-2019 form)

| BIOGRAPHICAL | INFORMATION | N . | | | | | |
|---|---|------------------------|--|-------------|-------------|--|--|
| Last Name: | | | First Name: | | | | |
| Middle Name (if any |): | | | | | | |
| Gender | Male | le | Date of Birth: | | | | |
| City of Birth: | | | Country of Birth: | | | | |
| Country of Citizenship: | | | Country of Permanent Residence: | | | | |
| Permanent Address (in country of Permanent Residence): | | | Phone Number: | | | | |
| | | | E-mail Address: | | | | |
| | | | U.S. Social Security ID # (if any) | | | | |
| | | | University of Michigan ID # (if any) | | | | |
| Mail DS-2019 To Address: | | | Position or Occupation (in country of Permanent Residence): if student please indicate level in school | | | | |
| | | | Institution/Organization where position/occupation was held: | | | | |
| Major Subject/ Field: | | | Specialty within field: | | | | |
| Have you ever been | Have you ever been in a J-1 program before at the University of Michigan? | | | | | | |
| | | | | | | | |
| DEPENDENT (J-2) INFORMATION Exchange visitor's non-U.S. citizen spouse and children under the age of 21 are eligible to obtain J-2 dependent status. | | | | | | | |
| Will your family men | ill your family members accompany you to the U.S.? | | | ☐ YES ☐ NO | | | |
| | Dependent 1 | Dependent 2 | Dependent 3 | Dependent 4 | Dependent 5 | | |
| Relationship to J-1 (ie, spouse, child) | | | | | | | |
| First Name | | | | | | | |
| Middle Name | | | | | | | |
| Last Name | | | | | | | |
| Birth Date | | | | | | | |
| Birth City | | | | | | | |
| Birth Country | | | | | | | |
| Permanent Residence Country | | | | | | | |
| University of Michigan ID (if any) | | | | | | | |
| Page 1 of 2 | m:/ic | all/icpdf/isss/departm | ent/ds2019_Info_NewE | V | rev 04/10 a | | |

| U.S. IMMIGRATION INFORMATION Please answer the following questions. | | | | | | |
|--|----------------|-----|--|--------------|--|--|
| Have you held a J-1 or J-2 status in the past two years preceding this requested program? | | YES | | NO | | |
| How will you obtain J-1 status? | | | | | | |
| ☐ I will apply for a J-1 visa at a US consulate/embassy abroad | | | | | | |
| ☐ I am in the US in another status and will request to change my status to J-1 within the U.S. My current status is | | | | | | |
| I am currently in J-1 status and will transfer my J-1 program to the University of Michigan | | | | | | |
| Have you applied for 212 (e) [two-year home residency requirement] waiver? Yes No | | | | | | |
| If yes, have you received a waiver recommendation from the U.S. Dept of State? | | | | | | |
| When did you begin your J-1 status at your current institution? | | | | | | |
| What organization/ institution is your J1 program sponsor? | | | | | | |
| What is your current J-1 category? Student Research Scholar Professor Short Term Scholar Other | | | | | | |
| Will you be visiting other U.S. universities during your stay at University of Michigan? YES NO If yes, what are your plans? | | | | | | |
| What other U.S. visa stamps do you hold? | | | | | | |
| | | | | | | |
| FUNDING SOURCES Please specify all outside funding sources you will receive during your J-1 program. If you will be fully funded by the University of Michigan you do not need to complete this section. Please note the minimum requirements below. | | | | | | |
| Minimum Funding Amounts Exchange visitor with no dependents \$2,000/ month (\$24,000/ year) Exchange visitor + 1 dependent \$2,900/ month (\$34,800/ year) Exchange visitor + 2 dependents \$3,400/ month (\$40,800/ year) For each additional dependent add: \$300 per month (\$3,600/year) | | | | | | |
| Name of Organization | Funding Amount | | | | | |
| 9 | \$ | | | | | |
| | \$ | | | | | |
| | \$ | | | | | |
| Copies of financial documentation for all non-University of Michigan funding sources is required. Examples are a personal bank statement or an award letter. The document must contain the following information: 1. Your full name 2. Is dated no more than 6 months before a DS-2019 form is requested 3. Is written in English or has been translated into English 4. Specifies the amount of funding 5. The amount is in U.S. currency or has been converted into U.S. currency (http://www.xe.com) | | | | | | |
| I understand that as a J-1 Exchange Visitor, I am required to attend a mandatory check-in program at the University of Michigan International Center and that I am required to maintain health insurance that meets the requirements of the U.S. Exchange Visitor program and the University of Michigan. To the best of my knowledge, all of the information I have supplied here is accurate. | | | | | | |
| SIGNATURE | Date | | | | | |
| Page 2 of 2 m:/icall/icpdf/isss/department/ds2019_Info_NewEV | | | | rev 04/10 at | | |