



# ***J-1 STUDENT INTERN DS-2019 REQUEST FORM***

**Return To:**  
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Office of Global Affairs  
Greenville, NC 27858-4353  
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**Purpose of this form:** To request a DS-2019, which the Student Intern will need to obtain a J-1 visa.

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## **SECTION 1: EAST CAROLINA UNIVERSITY HOST DEPARTMENT INFORMATION**

1. Student Intern Name:	<input type="text"/>	2. Date of Birth	
3. ECU Faculty Supervisor:	<input type="text"/>		
4. ECU Host Department:	<input type="text"/>		
5. Dates of proposed internship	<input type="text"/>	<input type="text"/>	

(must be 12 months or less; J-1 regulations do not permit extensions beyond 12 months.)

Start Date (mm/dd/yyyy)                      End Date (mm/dd/yyyy)

## **SECTION 2: STUDENT INTERN INFORMATION**

Residential Address in Home Country:

Street and Apartment Number

City

State/Province

Postal Code

Country

Telephone Number

### SECTION 3: DEPENDENT INFORMATION

If the Student-Intern wishes to invite dependents (children under the age of 21 or a spouse) in J-2 status, complete the information below for each dependent. (Note: J-2 dependents are not allowed to enter the U.S. before the J-1's initial entry.)

#### DEPENDENT 1

6. Name Shown on Passport     
First/Given Name Middle Name Last or Family Name

7. Email Address   
(Required for Spouse)

8. Date & Location of Birth     
MM/DD/YYYY City of Birth Country of Birth

9. Country of Citizenship

10. Country of Legal Permanent Residence

11. Gender  Male  Female 12. This Person is the Student-Intern's:  Spouse  Child

#### DEPENDENT 2

12. Name Shown on Passport     
First/Given Name Middle Name Last or Family Name

13. Email Address   
(Required for Spouse)

14. Date & Location of Birth     
MM/DD/YYYY City of Birth Country of Birth

15. Country of Citizenship

16. Country of Legal Permanent Residence

17. Gender  Male  Female 12. This Person is the Student-Intern's:  Spouse  Child

#### DEPENDENT 3

18. Name Shown on Passport     
First/Given Name Middle Name Last or Family Name

19. Email Address   
(Required for Spouse)

20. Date & Location of Birth     
MM/DD/YYYY City of Birth Country of Birth

21. Country of Citizenship

22. Country of Legal Permanent Residence

23. Gender  Male  Female 12. This Person is the Student-Intern's:  Spouse  Child

## SECTION 4: FINANCIAL SUPPORT

24. Has the ECU received funding from the U.S. government specifically for the purpose of international educational exchange for this applicant (this does not include government grants given to the ECU directly, other than for the specific purpose of exchange)?

Yes     No

25. If yes, please specify

Indicate in the chart below all sources of funding for the period requested in this application based on the minimum funding requirements. Attach copies of documentation to verify funding indicated in chart (ex. offer letter, scholarship letter, bank statement).

**Minimum funding requirements\*:**

For	Per Month	Per Year
J-1 Student Intern	\$1,500	\$18,000
<b>Additional funds are required if intern is inviting J-2 dependents:</b>		
J-1 Student Intern + Spouse	\$2150	\$25,800
J-1 Student Intern + Child	\$1,850	\$22,200
J-1 Student Intern + Spouse + Child	\$2,500	\$30,000
Each Additional Child	\$350	\$4,200
*Minimum considers cost of basic accommodations, utilities, food, transportation, & health insurance. Planning for more is recommended.		

*Documentation should be in US\$ or include currency conversion. It should be in English or have an unofficial English translation attached.*

*ECU Offer Letters: If the dates in this request do not match the initial offer dates in your letter, a statement should be added in/with the letter that the department requests the DS-2019 to be issued for the dates matching in this request.*

*Funding ranges: If a funding letter provides a range of support, the lower amount is to be used for this request.*

FUNDING SOURCE	FUNDING PROVIDER AND AMOUNT
<b>East Carolina University</b>	Amount: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<b>U.S. government agency</b>	Name of Agency: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> Amount: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<b>International organization</b>	Name of Organization <div style="border: 1px solid black; height: 20px; width: 100%;"></div> Amount: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<b>Exchange visitor's government</b>	Amount: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<b>Binational commission of the exchange visitor's country</b>	Amount: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<b>All other universities or organizations</b>	Name of Other: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> Amount: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<b>Personal Funds</b>	Amount: <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<b>Total in US\$</b>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

## SECTION 5: ECU DEAN, DEPARTMENT HEAD AND FACULTY SUPERVISOR SIGNATURES

*ECU Dean, Department Head and Faculty Supervisor: Please read and sign below.*

We understand that the primary purpose of the J Exchange Visitor Program is not to provide employment, but to foster the exchange of ideas between Americans and foreign nationals and to stimulate international collaborative teaching and research efforts.

We understand that the exchange of Student Interns promotes mutual enrichment and linkages between research and educational institutions in the United States and foreign countries. It does so by providing foreign Student-Interns the opportunity to receive, from their American faculty mentors, training in their major field of study, to participate actively in cross-cultural activities with Americans, and ultimately to share with their fellow citizens their experiences and increased knowledge about the United States and their substantive fields.

***We understand that J-1 Student Interns' primary activity must be to receive training in their major field of study. We will not place the Student-Intern in an unskilled or casual labor position, a position that requires or involves child care or elder care, or a position in the field of aviation. We will not place the Student Intern in a clinical position or a position that engage in any kind of work that involves patient (human or animal) care or contact, including any work that would require medication or other clinical or medical care. No more than 20 percent of the Student Intern's activity will be clerical.***

Our department is inviting this individual for the period indicated.

If our department will be funding the Student Intern, we verify that the information is accurate in the application materials.

We understand that the Student Intern and their dependents are required to carry health insurance for the duration of their stay. ECU requires all of its J visa holders to enroll in the GeoBlue health insurance

If the Student Intern is requesting to transfer to ECU from another J Program Sponsor in the U.S., we confirm that this will be a continuation of their original program. This means that the Student Intern's program objectives at ECU will be consistent with the individual's original program objectives for which they were initially invited to the U.S. to complete.

### A signature for each position is required below

Further, as the Faculty Supervisor I attest that the Student Intern's program is non-clinical. I understand that any direct patient contact will result in immediate termination of the Student Intern's immigration status. I certify that I will conduct a final evaluation with the Student Intern and a mid-point evaluation if the Internship is 6 months or longer, and I will send a copy of the evaluation to the Office of Global Affairs for required record keeping. I certify that I have read the conditions of sponsoring a Student Intern and understand the limitations of their J-1 status. I hereby certify that the information provided is accurate to the best of my knowledge.

Signature of ECU Faculty Supervisor

Print Name

Date

As the Department Chair, I hereby certify that the department supports this request to sponsor a J-1 Student Intern.

Signature of ECU Department Head

Print Name

Date

As the Dean, I hereby certify that the department supports this request to sponsor a J-1 Student Intern.

Signature of ECU Dean

Print Name

Date

This form is in support of [Student Intern Surname] [Student Intern Given Name]