DS-2019 REQUEST FORM

J-1 EXCHANGE VISITOR APPLICANT

PART I - TO BE COMPLETED BY THE SPONSORING DEPARTMENT

Supervisor Name:					
E-mail:			Ph	one:	
Host Department:	Department Add	ess:			
Program Duration: Begin	Date:		End Date:		
1. Exchange Visitor Category: [2. Description of Activity The exchange visitor will be engagen	Professor Research Scholar Intern (12 months or less) ed in the following activity(ies):		Short-Term	Scholar (6 mc	onths or less)
The U.S. Consulate will expect Copy of biographical passport Current resume or equivalent of Proof of funding (see item #4) i 4. Funding Provide documentation on the sou		n requ	esting a J-1 visa	Non-UTEP fur	nding
UTEP Funding:	Amount \$	per	Month	Year	Entire Program
Visitor's government:	Amount \$	_ per	Month	Year	Entire Program
Other organization(s):	Amount \$	_ per	Month	Year	Entire Program
Personal Funds	Amount \$	_ per	Month	Year	Entire Program

Union East Bldg. Room 203

PART II - TO BE COMPLETED BY THE EXCHANGE VISITOR

te of Birth:	c	ity of Birth:		Country	of Birth:		
untry of Citizen	ship:	Country of Permanent Res			sidence:		
nail:							
ysical Address							
mber & Street:					Zip Code:		
ry:	Si	tate/Province:		Country:			
ailing Address (if different from phy	sical address)					
ımber & Street:	mber & Street:			Zip Code:			
:y:	itu.		State/Province: Country		r.		
f yes, please prov	leted a previous ter vide copies of your pr ly in the U.S.?	m as a J-1 Resea evious DS-2019, v Yes No	nrch Scholar, Vis i risa, and l-94 (and	dependents docume	nts if applicable).	No	
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PART III - TO BE COMPLETED BY THE SPONSORING DEPARTMENT

VERIFICATION OF ENGLISH LANGUAGE PROFICIENCY

The U.S. Department of State regulations for J-1 Exchange Visitors [22 CFR 62.11(a)(2)] require that program sponsors verify that a prospective J-1 Exchange Visitor's English proficiency is sufficient to participate in his or her program and to function on a day-to-day-basis as determined by an objective measurement of English language proficiency.

The following measures listed below are acceptable proof of English Proficiency. Please select any of the measures
and attach the corresponding supporting documentation.
The exchange visitor is from a country where the primary language is English. Country of origin:
Any of the following exam scores (Test must have been taken within the last 2 years): IELTS: 6.5 minimum score.
TOEFL:
Paper-based: minimum score of 500.
Computer-based: minimum score of 173.
Internet exam (TOEFL IBT): minimum score of 61.
PTE (Pearson Test of English): minimum score of 44.
Online Pearson Versant English Test.
 Transcripts showing a degree earned in a U.S. college or university. May not be a bilingual program and degree must have been obtained within the last 5 years. Interview, in English, was conducted by the UTEP sponsoring professor.
Interview Certification UTEP Sponsor (faculty or professional staff)
I certify that I conducted an interview, in English, with the prospective J-1 Exchange visitor on this date:
UTEP Sponsoring Professor/Administrator name and title:
Type of Interview:
Signature: Date:

PART IV - TO BE COMPLETED BY J-1 STUDENT INTERN HOME INSTITUTION

Student Name:	
Home Institution Certification	
Home Advisor Name:	Title:
E-mail:	Phone:
Host Department:	Department Address:
Degree Student is Currently Pursuing:	Field of Study:
Student's estimate degree/certification completion date:	
PART V - TO BE COMPLETED BY THE	SPONSORING DEPARTMENT & HUMAN RESOURCES
PART V - TO BE COMPLETED BY THE	SPONSORING DEPARTMENT & HUMAN RESOURCES
PART V - TO BE COMPLETED BY THE Approval from Corresponding Department Chair or De	
	ean of College:
Approval from Corresponding Department Chair or De	ean of College:
Approval from Corresponding Department Chair or De	ean of College:
Approval from Corresponding Department Chair or De Printed Name and Title: Signature: Approval from Human Resources • If the Exchange Visitor receives monetary compensation	ean of College:
Approval from Corresponding Department Chair or De Printed Name and Title:	ean of College: Date:
Approval from Corresponding Department Chair or De Printed Name and Title: Signature: Approval from Human Resources If the Exchange Visitor receives monetary compensation the form below (signature). If the Exchange Visitor DOES NOT receive monetary compensation the form below (signature).	Date: