CENTRAL MICHIGAN UNIVERSITY

Department Request for Exchange Visitor

Research Scholar/Short-Term Scholar/Professor

Office of Global Engagement

330 Ronan Hall, Mount Pleasant, MI 48859 • Phone: (989) 774-4308 • Fax: (989) 774-3690

In order to issue a form DS-2019, which will be used to apply for a J-1 visa, please have the Exchange Visitor submit via email the required documents below to:

Lindsay Barron lindsay.barron@cmich.edu International J-1 Student/Scholar Advisor		
<u>Required Documents</u>		
Sponsoring Department	Exchange Visitor	
 Letter of Invitation from CMU 	 Exchange Visitor Request 	
Department	 Copy of Passport 	
	 Exchange Visitor's C.V. 	
 Department Request for Exchange 	 Copy of Research Plan 	
Visitor	 Proof of Funding 	
*please note that if dependents will need to be added additional documentation will be required		

Department Information

CMU Department/School:

Faculty Sponsor Name: _____

Contact Phone Number: _____ Contact Email: _____

Activity Information

This request is to:

Begin a new J-1 Exchange Visitor program at Central Michigan University

Extend current J-1 Program

Transfer the Exchange Visitor from a different J-1 program to CMU (additional J-1 transfer form required)

Please indicate the intended program dates of the Exchange Visitor:

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

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Please select the category of Exchange Visitor:

Professor

A professor primarily teaches, lectures or observes while at CMU. He/she may also conduct research

Research Scholar

A research scholar primarily conducts research, observes, or consults in connection with a research project at CMU. He/she may also teach or lecture.

Short-Term Scholar

A professor, research scholar, specialist, or a person with similar education or accomplishments coming to the United States on a short-term visit for the purpose of lecturing, observing, consulting, training, or demonstrating special skills.

Please indicate the reason for the Exchange Visitor's time at CMU:

Describe the specific field of study and the research, training, or professional activity the visitor will be engaged in (ie. Research Scholar conducting research in Computer System Analysis):

Health Insurance

Please indicate who will be responsible for the payment Exchange Visitor's Health Insurance:

Sponsoring Department

Exchange Visitor

Please note: Insurance provided to CMU Faculty and Staff does **not** meet the minimum requirements for the Exchange Visitor program. These requirements are set by the Department of State, not CMU. If the Exchange Visitor choses to use this coverage, they will be required to also purchase supplemental coverage for Medical Evacuation and Repatriation.

Housing Information

Please indicate who will be responsible for arranging the EV's housing:

Sponsoring Department

Exchange Visitor

For more information about on-campus Apartment living, please contact the University Apartments office, in the Office of Residents Life, for availability at (989) 774-3284 or via email at <u>apts@cmich.edu</u>.

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Funding Information

Please indicate below the Exchange Visitor's source(s) of funding. Estimate the EV's total funding including personal funds provided by the EV. Include in the estimate monies intended to cover room and board, tuition, and other costs.

Central Michigan University	\$
U.S. Government Agency ()	\$
International Organization ()	\$
The Exchange Visitor's Government	\$
The Binational Commission for the visitor's country	\$
All other organizations provided support	\$
Personal Funds	\$

Signatures

Name of Department Chair

Signature

College Dean

Signature

Date

Date



Department Request for Exchange Visitor Form *Research Scholar/Short-Term Scholar/Professor*

Office of Global Engagement

English Verification Form- Scholar/Professor

Name of J-1 Scholar/Professor:			
Name of host Faculty:			
Name of Sponsoring Department:			
The English proficiency of the above-named scholar has been demonstrated by the following method (check one):			
TOEFL Exempt Country	Country:		
or TOEFL Overall Score of 79 or higher			
or IELTS Overall Score of 6.5 or higher (please see attached test score			
or Interview by Sponsor			
Name of Interviewer:	Date:		
Interview Method: In Person	Video Telephone		
The scholar/professor understood (check one):			
With ease virtually everything that was said			
The main points of standard conversation about relevant topics			
Only everyday expressions and very basic phrases			
The scholar/professor was able to express him/herself (check one):			
Very fluently and precisely			
In a manner that allowed for functional interaction with a native speaker without great difficulty			
In a simple way that required clarification	and assistance		
By signing this document, the faculty/department sponsor c	ertifies that good faith effort has been made to ensure		

By signing this document, the faculty/department sponsor certifies that good faith effort has been made to ensure the exchange visitor possesses sufficient proficiency in the English language, as determined by an objective measurement of the English language, to successfully participate in his or her program and to function on a day-today basis. The applicant's English language proficiency has been verified through a recognized English language test, by signed documentation from an academic institution or English language school, or through a documented interview conducted by the sponsor either in-person or by videoconferencing, or by telephone if videoconferencing is not a viable option.

Signature:

Date:

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