International Student and Scholar Services (ISSS) looks forward to welcoming you to campus for your exchange program.

The purpose of the U.S. Departments of State’s Exchange Visitor Program (J-1 status) is to promote mutual understanding between the people of the United States and the people of other countries by educational and cultural exchanges.

If you have questions, please contact j1ev@cmich.edu or by calling the office at 989.774.4308.

Process
1. Complete the J-1 Exchange Visitor (EV) Student Intern Request and submit the request and supporting documents to j1ev@cmich.edu.
2. An ISSS advisor reviews all the documents after they have all been submitted. If there are questions or concerns the advisor will reach out to you and/or host department.
3. The ISSS advisor will issue the DS-2019 and send it via email to you.
4. Apply for the J-1 visa at a U.S. embassy or consulate of your choosing.
5. Email j1ev@cmich.edu when you have decided on your arrival date.
6. Within 30 days of the program start date (on the DS-2019), schedule a J-1 Immigration Check-in at http://tinyurl.com/ISSSappt.

For International Students and Scholars (ISSS) to issue form DS-2019, each exchange visitor must complete the form below for issuance of the DS-2019 and attach supporting documents:

- Passport Copy
- CV
- If you are employed (receiving payment/wages), you will need the approval of your home institution’s dean or academic advisor (sample letter is included in this document).

Once completed, please submit the required documents in one PDF to j1ev@cmich.edu. In the subject line, please include the Exchange Visitor’s name and “Create DS-2019 Request”.
J-1 Exchange Visitor (EV) Student Intern DS-2019 Request

Exchange Visitor Information (Please be sure to list your name exactly as it appears in your passport.)

________________________________________  __________________________________________  ____________________________
Family name          Given name          Middle name

________________________________________
Email

CMU Host Department Information

________________________________________
Host department name

________________________________________
CMU host faculty name

DS-2019 Biographical Information

Gender: Male    Female

Date of birth (mm/dd/yyyy)

________________________________________
City of Birth

________________________________________
Country of Birth

Country of Citizenship

Country of Permanent Residency

Address outside of the United States

________________________________________  __________________________________________
Street Address          City

________________________________________
State/Province          Postal/Zip Code          Country

+(______)________________________
Country Code and Phone Number
Previous J-1 Program Information
Have you been in J-1 or J-2 status in the past 5 years? Yes No

If you select yes, please submit copies of all previous DS-2019s.

DS-2019 Program Information
If you are a student, please indicate your current level of study:

Bachelor  Master  Ph.D.

Name of home institution

Dependents
If you will be bringing any dependents with you (spouse or child), in addition to extra funding (see financial documents), you will also need to provide a copy of each person’s passport. Additionally, you will also need to provide a copy of your marriage certificate and for your children you need to provide a copy of their birth certificate. You will need to provide English translations of the marriage certificate and/or birth certificate if they are not already in English.

<table>
<thead>
<tr>
<th>Name (as it appears on the passport)</th>
<th>Gender (male/female)</th>
<th>Date of birth (mm/dd/yyyy)</th>
<th>City and Country of Birth</th>
<th>Country of Permanent Residence</th>
<th>Country of Citizenship</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spouse:</td>
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<tr>
<td>Child:</td>
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<td>Child:</td>
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</tbody>
</table>

Revised 5/9/2024
Financial Support
To be eligible for the DS-2019, Exchange Visitors (EV) must submit financial documents to show they have sufficient financial support for the duration of their program.

Exchange Visitor Information (Please be sure to list your name exactly as it appears in your passport.)

__________________________  ______________________________________  ____________________________
Given (first) name  Family (Last) name  Middle name

Host department name  CMU host faculty name

Financial support needed:
A minimum of $20,000 USD of support per year for the Exchange Visitor is required. If the exchange visitor’s program is less than one year, the amount will be prorated. If you are bringing any dependents with you (spouse or child) there is an additional proof of funding requirement of $5,000 USD per dependent, per year.

Financial support worksheet (expenses listed on DS-2019)

<table>
<thead>
<tr>
<th>Expense</th>
<th>Number</th>
<th>Amount</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Living expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dependents</td>
<td>X</td>
<td>$5,000</td>
<td>=</td>
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</tbody>
</table>

Total expenses on DS-2019: ____________

Sources of funding supporting documentation
We will accept the following as proof of adequate financial support:

- If you will be sponsored by CMU, please submit your official appointment letter to show salary/stipend amount.
- If you are using personal or sponsor funds, you will be required to submit a personal bank statement or bank letter showing the required amount of funding in an account in English. This must be on bank letter head and/or signed by a bank official. Translations must be completed by a certified translator, not the Exchange Visitor. Funds must be liquid funds such as a checking or savings account. Bank letters/statements cannot be more than 6 months old.
  - We cannot accept the following documents: property certificates, health/life insurance accounts, retirement accounts, value of business, or credit card statements.
  - If someone other than yourself is sponsoring you, please completed the sponsor affidavit in this request.
- If you are receiving government funding or any other form of scholarship, please send us a copy of the letter that indicates the amount awarded and what will be covered. If the amount is not enough to cover the entirety of your stay, you will need to submit a supplemental bank statement.
Sources of funding worksheet

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
<th>Required supporting documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sponsor</td>
<td></td>
<td>Sponsor affidavit (see next page), bank statement/letter</td>
</tr>
<tr>
<td>Binational commission</td>
<td></td>
<td>Letter of sponsorship</td>
</tr>
<tr>
<td>Home country government</td>
<td></td>
<td>Letter of sponsorship</td>
</tr>
<tr>
<td>Personal</td>
<td></td>
<td>Bank statement/letter</td>
</tr>
<tr>
<td>U.S. government organization</td>
<td></td>
<td>Letter of sponsorship</td>
</tr>
<tr>
<td>International organization</td>
<td></td>
<td>Letter of sponsorship</td>
</tr>
<tr>
<td>Other organization</td>
<td></td>
<td>Letter of sponsorship</td>
</tr>
</tbody>
</table>

Total from all sources of funding:

Note: The total from all sources of funding must exceed or be equal to the financial support worksheet (previous page).
Sponsor Affidavit of Financial Support

To be completed by the student:

__________________________  ___________________________  __________________
Family (last) name          Given (first) name             CMU ID Number

To be completed by the sponsor:

Sponsor name: ______________________________________________________________

Sponsor’s relationship to student: __________________________

Sponsor’s current address: ____________________________________________________

Amount in USD of funding to be provided to the student: $ __________________________

Please provide the student intern a recent (no older than 6 months) bank statement or letter as proof (in English) of funding referencing to an account to which you have the authority to use funds. This must be on bank letter head and/or signed by a bank official.

Will these funds be issued from a business, company, or corporate account which you have authority to use?

Yes.  Letter on bank letterhead required must indicate the following:

• A list of signatories on the account
• If there are multiple signatories, a statement indicating how each signatory can use account funds. (Example: can they sign alone, or must they sign together)

No.- this is from my personal account

I certify that I have read and understand this document. To the best of my knowledge, the statements made herein are accurate and complete. I agree to provide the funds listed above to meet the required expenses for this student. I further agree that all documentation I provide as proof of available funds are accurate and complete to the best of my knowledge. I understand that the deliberate falsification of any financial documentation provided to the university may result in revocation of the DS-2019.

__________________________________________________________  _______________________
Sponsor signature                                              Date (mm/dd/yyyy)

Revised 5/9/2024
Home Institution Verification Letter

If you are employed (receiving renumeration), you will need the approval of your home institution’s dean or academic advisor. Please see the sample letter below.

Please write the letter on university letterhead.

Date

International Student and Scholar Services
Central Michigan University
330 Ronan Hall
Mt. Pleasant, MI 48859

To Whom It May Concern:

I am aware that (student name) has been admitted to an internship program at Central Michigan University beginning (date) and ending (date). Below are the details about (student name):

Enrollment status:
Current program:
Current degree level:
Expected degree completion date:

(Student name) is currently in good standing at (university name). (Student name) will fulfill (his/her/their) educational objectives for (his/her/their) current degree program at the home institution by participating in this internship program.

I understand that Central Michigan University will be paying the student during the period of the internship program.

Signature of dean/academic advisor
Printed name of dean/academic advisor