

REQUEST FORM FOR CERTIFICATE OF ELIGIBILITY (DS-2019) FOR J-1 VISA STATUS

International Student Office (ISO)

Tolliver Hall Room 229 P.O.Box 3037 Ruston Louisiana 71272

Website: www.iso.latech.edu

Phone: (318) 257-4321, Fax: (318) 257-2968

Type or print clearly. See reverse side for eligibility requirements. Read the attached instructions and complete all items. Obtain the signature of the LA Tech Department Chair and faculty advisor; attach resume, picture page of passport(s), and evidence of financial support. Return the form to ISO. A DS-2019 will be prepared within 10 working days and **returned to the department** for mailing to the EV. If you need assistance, call ISO.

A. Purpose of this DS-2019:

Begin New Program, or change visa to J-1, accompanied by ___ family member[s].

Transfer of J-1 visa to LA Tech from another U.S. institution.
When did the Exchange Visitor begin the J-1 visa at the other institution? _____
EV's previous J-1 visa category at the other institution (in Box 4 on your last DS2019)

Extension of stay to continue an ongoing Program.

Separate entry of ___ family member[s]

Replace lost/Damaged DS-2019 form

B. Exchange Visitor's Name: _____

Last

First

Middle

Male Female City of Birth: _____ Country of Birth: _____

Birth Date: _____ Country of Citizenship: _____ Country of Permanent Residence: _____

Married: Yes No Occupation in home country: _____ Employer: _____

Highest Degree Earned: Bachelor Master PhD Other: _____ Date Awarded: _____

Passport Number: _____ Expiration Date: _____ (**Attach copy of photo page**)

U.S. Address: _____ Permanent Address outside U.S.: _____

Phone #: _____ Phone #: _____

Email: _____ Email: _____

C. Dates of Appointment: **From:** _____ **To:** _____

D. Appointment or primary activity while at Louisiana Tech/ J-1 Visa Category:

Professor (TEACH, LECTURE, OBSERVE, OR CONSULT ON A NON-TENURE APPOINTMENT; MA/ MS/PHD REQUIRED)

Researcher (RESEARCH, OBSERVE, OR CONSULT; MA/MS/PHD REQUIRED)

Degree Student (ENGAGED FULL-TIME IN A DEGREE PROGRAM – INDICATE DEGREE EXPECTED)

Subject of **studies, research, or teaching** at LA Tech: _____

E. Financial Support for the entire **period covered by this form**. Specify amounts in **US dollars**

Louisiana Tech: Dept budget, grant, etc. \$ _____

Payroll title: _____ **Is this a Non-tenure track position?** Yes No

U.S. Government agency funds to **this** Exchange Visitor: \$ _____

Name of the Agency: _____

International Organization [e.g. UN, WHO, NATO] funds to **this** Exch. Visitor: \$ _____

Name of Organization(s): _____

Exchange Visitor's Government. \$ _____

Name of the Agency: _____

Other organizations/institutions in the U.S. or abroad: \$ _____

Name(s): _____

Personal funds. \$ _____

F. Medical Insurance: Who will cover the costs (check one): Tech EV Other (Specify) _____

G. Dependents coming or continuing in the U.S. - DO NOT list dependents who hold U.S. Passports or were born in the U.S.

Name: **Last, First, Middle** Relationship City / Country of Birth Date of Birth Country of Residence / Citizenship

H. Louisiana Tech faculty member under whose direction the Exchange Visitor's primary activity will be carried out:

Name: _____ **Title:** _____

Campus Address: _____ Phone: _____

Email: _____ Signature: _____

I. CERTIFICATION and APPROVAL:

I hereby certify that the information provided on this form is true and correct to the best of my knowledge.

Name of person preparing this form Phone Email

Signature Date

J. Louisiana Tech DEPARTMENT CHAIR'S APPROVAL:

This certifies that the person named above is eligible, qualified and accepted to carry out, during the period specified in item C, the activity(ies) indicated. The department has verified the educational credentials and source(s) and amount of funding available.

Chair's Name **Phone** **Email**

Signature **Date** **LA Tech Department**

Visitor is **NOT ELIGIBLE** for **J STATUS** under the following circumstances:

1. If he/she had completed a previous J program (eg. Specialist or Student) which lasted more than 6 months and now requesting a J status as a **RESEARCH SCHOLAR** or **PROFESSOR** to start a **NEW PROGRAM**, there must be a 12-month gap between the end date of the previous J/J2 program and starting date of the new J program.
2. If he/she had completed a **previous J program** in the U.S as **A PROFESSOR** or **RESEARCH SCHOLAR**, he/she is subject to a **24-MONTH BAR (gap) TO START A NEW J PROGRAM** as **A PROFESSOR** or **RESEARCH SCHOLAR**.
3. If he/she had applied for a an “H” class **VISA** or U.S.. **PERMANENT RESIDENT STATUS** (green card).
4. If he/she had **applied for a Waiver of the Two Year Home Residence Rule** and **RECEIVED APPROVAL** notification from the State Department or the U.S. Citizenship and Immigration Service (USCIS).
5. If the **STUDENT** is fully supported by **PERSONAL FUNDS**.
6. If the position is **TENURE TRACK**.