

# J-1 Student (non-degree) – Request for DS-2019 | Form J1SNOND

This packet is to be used by EMU departments who wish to host J-1 Student in a Non-degree program. The program participation is for a minimum of 3 weeks to no more than 24 months, inclusive of academic training. It is extremely important that the Office for International Students and Scholars has the required information to process the immigration documents in a timely manner. There are 2 sections to the request form: one for the student to complete and another for the host department. All supporting documents **MUST** accompany the request. Please note:

- Processing time for DS-2019 requests is 7– 10 business days
- Complete requests **MUST** be received a **minimum of 8 weeks** prior to the anticipated arrival date
- Incomplete applications will be returned to the host department

**Supporting Documents** that **MUST** accompany this form include:

- Agreement for the program
- Proof of funding**, if funded other than EMU
- Passport Identity Page** photocopy
- Passport Identify Page for all dependents requiring a DS-2019, photocopy
- Federally mandate English language proficiency [22 CFR 62.10(a)(2)]: an official English language test score, or an oral interview report from the ESL Program at EMU (see below)\*\***

**Non-Degree Student:** EMU is authorized to host J-1 non-degree students who are currently enrolled at a postsecondary academic institution outside the United States, or engaged full-time in a “prescribed course of study” for professional development.

**\*\*English Language Skills:** The host department must provide validation that a scholar has **sufficient English proficiency** to undertake the program. This validation can be in the form of an official English language test score (iBT, IELTS, PTE, MELAB), or an “Oral Interview Report of English Proficiency” (from the EMU ESL Program).

**Funding Requirements:** Minimum funding requirements are:

- J-1 Living Expenses: \$18,000/yr (\$1500/month)
- J-2 Spouse Living Expenses: \$5,000/yr
- J-2 child Living Expenses, under 21 years of age: \$3,000/year for EACH child

**Insurance Requirements:** Federal regulations require that all J-1 and J-2 visa holders carry health insurance **during their entire stay in the USA**. The **EMU offered policy** fulfills this requirements. The student and dependent are required to purchase the policy from EMU. Coverage is arranged by the University Health Services. Details of 22 C.F.R. § 62.14 “Mandatory Health Insurance for Exchange Visitors” regulations are attached to this request.

**Assistance:** The host department is responsible to assist the student with arrival and departure transportation, and housing arrangement.

**Initial Visit:** Upon arrival, each student is required to make arrangement to meet with an OISS advisor to process SEVIS check-in.

**Note:** *If a student is unable to come on the arrival date listed on the DS-2019, the host department must inform the OISS to defer the program. The record will be invalid in 30 days of the program start date; it is critical to update the record.*

## J-1 Student (non-degree) Request – to be completed by the Host Department

Student's First Name:	Middle Name	Last Name
Date of Program: from (mm/dd/yyyy)		to:
Professor/Collaborator in Department: (who will work with this visitor)	Phone: _____ Email: _____	
Major Field & <b>Description of Activity</b> at EMU:		
Location of Activity:	Address of Activity:	
	City	State      Zip

### Source of Funding for the Duration of Requested Visit

- EMU Department Funds \$ \_\_\_\_\_ for the purpose of \_\_\_\_\_
- Health Insurance
- a. Is Health Insurance provided by the Host Department?  yes     No
- b. Will the student purchase EMU Health Insurance coverage?  yes     No
- Student's Government Funds: \$ \_\_\_\_\_
- Other Funds: \$ \_\_\_\_\_ Source: \_\_\_\_\_
- Personal/Family Funds: \$ \_\_\_\_\_

The Department is responsible to assist the visitor with transportation from the airport and arranging for suitable housing.

Name of Person to Contact when DS-2019 is ready for pick up:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Please return completed forms *and* required documents [via email to egunel@emich.edu](mailto:egunel@emich.edu)**

Or campus mail to: Esther Gunel  
EMU Office for International Students and Scholars  
240 Student Center

# J-1 Student (non-degree) Request – to be completed by the *Student*

Have you been in J-1 or J-2 status sometime within the past 3 years?

No  Yes - when: \_\_\_\_\_ category: \_\_\_\_\_  
 (If yes, copies of the DS-2019 must be attached with this request)

**Name must be exactly as it appears on your Passport; please print clearly or type information**

First Name:	Family Name:	Middle Name:
Male <input type="checkbox"/> Female <input type="checkbox"/>	Birth Date: Month	Day Year
City of Birth:	Country of Birth:	
Country of Citizenship:	Country of Legal Permanent Residence:	
Student category in Home Country: <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's or PhD <input type="checkbox"/> Employee		
Current Field of Study:		
Marital Status: <input type="checkbox"/> Yes <input type="checkbox"/> No	Children: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mailing Address:	Telephone Number: _____	
	Email Address: _____	

**Family Members who will accompany the student:**

Name, exactly as on passport: First, Middle, Last,	Gender M/F	Date of Birth (mm/dd/yyyy)	City & Country of Birth	Country of Legal Permanent Residence	Country of Citizenship
Spouse:					
Child:					
Child:					
Child:					
Child:					
Child					

**Funding Requirements:** Minimum funding requirements are:

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- J-2 child Living Expenses, under 21 years of age: \$3,000/year for EACH child

## 22 C.F.R. § 62.14 Mandatory Health Insurance for Exchange Visitors

(a) Sponsors shall require each exchange visitor to have insurance in effect which covers the exchange visitor for sickness or accident during the period of time that an exchange visitor participates in the sponsor's exchange visitor program.

**Minimum coverage shall provide:**

- (1) **medical benefits** of at least \$100,000 per accident or illness;
- (2) **repatriation of remains** in the amount of \$25,000;
- (3) expenses associated with **medical evacuation** of the exchange visitor to his or her home country in the amount of \$50,000; and
- (4) a **deductible** not to exceed \$500 per accident or illness.

(b) An insurance policy secured to fulfill the requirements of this section:

- (1) may require a **waiting period for pre-existing conditions** which is reasonable as determined by current industry standards;
- (2) may include provision for **co-insurance** under the terms of which the exchange visitor may be required to pay up to 25 percent of the covered benefits per accident or illness; and
- (3) shall not unreasonably exclude coverage for perils inherent to the activities of the exchange program in which the exchange visitor participates.

(c) Any policy plan or contract secured to fulfill the above requirements must, at minimum, be:

- (1) Underwritten by an insurance corporation having an A.M. Best rating of "A-" or above, an Insurance Solvency International, Ltd. (ISI) rating of "A-" or above, a Standard and Poor's Claims-paying Ability rating of "A" or above, a Weiss Research, Inc. rating of B+ or above, or such other rating service as the Agency may from time to time specify; or
- (2) Backed by the full faith and credit of the government of the exchange visitor's home country; or
- (3) Part of a health benefits program offered on a group basis to employees or enrolled students by a designated sponsor; or
- (4) Offered through or underwritten by a federally qualified Health Maintenance Organization (HMO) or eligible Competitive Medical Plan (CMP) as determined by the Health Care Financing Administration of the U.S. Department of Health and Human Services.

(d) Federal, state or local government agencies, state colleges and universities, and public community colleges may, if permitted by law, self-insure any or all of the above-required insurance coverage.

(e) At the request of a non-governmental sponsor of an exchange visitor program, and upon a showing that such sponsor has funds readily available and under its control sufficient to meet the requirements of this section, the Agency may permit the sponsor to self-insure or to accept full financial responsibility for such requirements.

(f) The Agency, in its sole discretion, may condition its approval of self-insurance or the acceptance of full financial responsibility by the non-governmental sponsor by requiring such sponsor to secure a payment bond in favor of the Agency guaranteeing the sponsor's obligations hereunder.

**(g) An accompanying spouse or dependent of an exchange visitor is required to be covered by insurance in the same amounts [as the principal].**

Sponsors shall inform exchange visitors of this requirement, in writing, in advance of the exchange visitor's arrival in the United States.

(h) An exchange visitor who **willfully fails to maintain** the insurance coverage set forth above while a participant in an exchange visitor program or who makes a material misrepresentation to the sponsor concerning such coverage shall be deemed to be in violation of these regulations and shall be subject to termination as a participant.