### SCHOLAR FORM DS-2019 REQUEST – CORAL GABLES AND RSMAS CAMPUSES Certificate of Eligibility for Exchange Visitor (J-1) Status

**PURPOSE OF THIS FORM:** to request a Form DS-2019 for a scholar for one of the following purposes: (1) Begin a new program; (2) Extend an ongoing program; (3) Transfer from a different program; (4) Amend a previous Form DS-2019.

**INSTRUCTIONS:** In order for your request for Form DS-2019 to be considered, you must complete this form in its entirety and submit it with the proper attachments to the Department of International Student and Scholar Services (ISSS) by the deadline for submission. Once all is submitted to ISSS, the Responsible or Alternate Responsible Officer will determine if the prospective exchange visitor meets the qualifications and eligibility for the exchange visitor (scholar) program as required by the U.S. Department of State. Please note that support staff positions are not appropriate for participants in the exchange visitor program. Only applications for faculty and non-faculty, researcher/scientist positions will be considered in the context of this program.

Failure to submit this request by the proper deadline will not only delay a scholar's arrival, but may also result in a violation of a scholar's J-1 status. Should a violation of status occur, the scholar would be prohibited from employment until reinstated by the U.S. Department of State. The reinstatement process may take several months.

### SECTION A: Indicate the purpose of this request.

1. ( ) Begin a new program ( ) accompanied by \_\_\_\_\_ immediate family members (only legally married spouse and minor children qualify)

Attachments (all attachments must be written in English; if an attachment is not available in English, the attachment must be accompanied by a certified English translation):

> Prospective scholar's current curriculum vitae. The candidate must have appropriate academic or similar credentials for his or her respective J-1 program category. Candidates who are in the process of completing a university degree but have not yet obtained such a degree may qualify for a short-term scholar program; however, they are not eligible for a research scholar or professor program.

- > Certification of English Language Proficiency, completed by the Departmental Sponsor.
- > A copy of the passport biographical data page for the prospective scholar and any dependents listed on this DS-2019 request.
- > An intent letter or courtesy appointment invitation letter, signed by the Departmental Sponsor.

> Letter of financial support if funding is from a source other than the University of Miami, with funding listed in U.S. currency.

DS-2019 Applicant Review Form (EXPORT-F-006), completed electronically by your department, submitted to the University of Miami's Export Control Compliance Office mailbox (exportcontrol@miami.edu), and returned to your department by Export Control Compliance with the orange box on the bottom completed. All prospective scholars must be screened and cleared by Export Control Compliance prior to any offer or intent letter being extended. Requests for screening must be submitted to Export Control Compliance through Form EXPORT-F-006, available on Export Control Compliance's website: <u>http://www.miami.edu/finance/index.php/ora\_homepage/researchers/export\_control\_technology\_management/</u>

## **Deadline for Submission:**

**No less than three months prior to the scholar's requested program start date.** Submit this form completed and signed by the Departmental Sponsor, the Departmental Chairperson, Departmental/Divisional Budget Officer and/or Sponsored Programs, and David J. Birnbach, MD, MPH (faculty and nonpaid non-faculty, researcher/scientist) or Karen Stimmell (paid non-faculty, researcher/scientist), with the proper attachments, to the Department of International Student and Scholar Services.

### 2. ( ) Extend an on-going program

Attachments (all attachments must be written in English; if an attachment is not available in English, the attachment must be accompanied by a certified English translation):

 $\succ$  Letter of financial support if funding is from a source other than the University of Miami, with funding listed in U.S. currency.

DS-2019 Applicant Review Form (EXPORT-F-006), completed electronically by your department, submitted to the University of Miami's Export Control Compliance Office mailbox (exportcontrol@miami.edu), and returned to your department by Export Control Compliance with the orange box on the bottom completed. All current scholars must be screened and cleared by Export Control Compliance prior to the extension of an on-going program. Requests for screening must be submitted to Export Control Compliance through Form EXPORT-F-006, available on Export Control Compliance's website: <u>http://www.miami.edu/finance/index.php/ora\_homepage/researchers/export\_control\_technology\_management/</u>

### **Deadline for Submission:**

No less than two months prior to expiration of the scholar's current Form DS-2019. Submit this form completed and signed by the Departmental Sponsor, the Departmental Chairperson, Departmental/Divisional Budget Officer and/or Sponsored

**3.** ( ) Transfer from a different program ( ) accompanied by \_\_\_\_\_ immediate family members (only legally married spouse and minor children qualify)

Attachments (all attachments must be written in English; if an attachment is not available in English, the attachment must be accompanied by a certified English translation):

> Prospective scholar's current curriculum vitae. The candidate must have appropriate academic or similar credentials for his or her respective J-1 program category. Candidates who are in the process of completing a university degree but have not yet obtained such a degree may qualify for a short-term scholar program; however, they are not eligible for a research scholar or professor program.

- > Certification of English Language Proficiency, completed by the Departmental Sponsor.
- An intent letter or courtesy appointment invitation letter, signed by the Departmental Sponsor.

> Letter of support if funding is from a source other than the University of Miami, with funding listed in U.S. currency.

DS-2019 Applicant Review Form (EXPORT-F-006), completed electronically by your department, submitted to the University of Miami's Export Control Compliance Office mailbox (exportcontrol@miami.edu), and returned to your department by Export Control Compliance with the orange box on the bottom completed. All scholars transferring to the University of Miami must be screened and cleared by Export Control Compliance prior to any offer or intent letter being extended. Requests for screening must be submitted to Export Control Compliance through Form EXPORT-F-006, available on Export Control Compliance's website:

http://www.miami.edu/finance/index.php/ora\_homepage/researchers/export\_control\_technology\_management/

 $\triangleright$  Copies of the scholar's passport biographical data page, expiration date page, J-1 visa page, Form I-94, and Form(s) DS-2019 issued by previous institution(s).

### **Deadline for Submission:**

**No less than two months prior to the scholar's requested transfer date.** Submit this form completed and signed by the Departmental Sponsor, the Departmental Chairperson, Departmental/Divisional Budget Officer and/or Sponsored Programs, and David J. Birnbach, MD, MPH (faculty and non-faculty, researcher/scientist) or Karen Stimmell (paid non-faculty, researcher/scientist), with the proper attachments, to the Department of International Student and Scholar Services.

#### 4. ( ) Amend a previous form

# Attachments (all attachments must be written in English; if an attachment is not available in English, the attachment must be accompanied by a certified English translation):

Amendment needed:

> Letter of financial support if funding is from a source other than the University of Miami, with funding listed in U.S. currency (only for scholars whose current Form DS-2019 will be amended to reflect a change in funding source and/or funding amount).

DS-2019 Applicant Review Form (EXPORT-F-006), completed electronically by your department, submitted to the University of Miami's Export Control Compliance Office mailbox (exportcontrol@miami.edu), and returned to your department by Export Control Compliance with the orange box on the bottom completed. All current scholars must be screened and cleared by Export Control Compliance prior to any offer or intent letter being extended. Requests for screening must be submitted to Export Control Compliance through Form EXPORT-F-006, available on Export Control Compliance's website: <a href="http://www.miami.edu/finance/index.php/ora">http://www.miami.edu/finance/index.php/ora</a> homepage/researchers/export control technology management/

Submit this form completed and signed by the Departmental Sponsor, the Departmental Chairperson, Departmental/Divisional Budget Officer and/or Sponsored Programs, and David J. Birnbach, MD, MPH (faculty and nonpaid non-faculty, researcher/scientist) or Karen Stimmell (paid non-faculty, researcher/scientist), with the proper attachments, to the Department of International Student and Scholar Services.

# CORAL GABLES AND RSMAS CAMPUSES

SECTI	ON B: Complete the following.	Date:				
			() M			
			( ) Fe	male		
1.						
	(surname/primary name of exchange visitor)		(given name)			
	born in in (city)	,				
	(mo.) (day) (yr.) (city)		(country)			
	a citizen of(country)	a legal permanent resident of	of			
	(country)		(country)			
	whose position in that country is					
	U.S. address					
2.	Will be sponsored by the University of Miami	, Department of				
3.	This request covers the period from $(mo.)$ $(day)$ $(yr.)$ to $(mo.)$ $(day)$ $(yr.)$ $(mo.)$ $(day)$ $(yr.)$ $(maximum of 1 year)$					
	(Those dates may not exceed one year; howev					
4a.	The category of this visitor is 1 ( ) Research Scholar, 2 ( ) Short-Term Scholar, 3 ( ) Professor, 4 ( ) Specialist.					
	The rank being offered to this exchange visitor (This may be a research employee category; if paid from a grant that is approved as havi	Research Staff Track I or II).		be appointed		
4b.	The exchange visitor has ( ) / has not ( ) (	check one) been in exchange vis	sitor status before.			
	Brief description of the specific field of research or professional activity (no more than 20 words):					
	I I I I I I I I I I I I I I I I I I I	I I I I I I I I I I I I I I I I I I I	· · · · · · · · · · · · · · · · · · ·			
	THE PARTICIPANT IS NOT A CANDIDATI	E FOR TENURE TRACK POSI	TION			
5.	During the period covered by this request, the	total estimated financial support	rt (in U.S. \$) is to be provid	ed to the exchange visitor by:		
	a. ( ) The Program Sponsor in item 2	above.	\$	Account #		
	This Program Sponsor has ( ) / has not ( ) Agency(ies) to support this exchange visitor.					
	Financial support from organizations other the of the following:	an the sponsor will be provided	by one or more			
	<ul> <li>b. ( ) U.S. Government Agency(ies):</li> <li>c. ( ) Int'l Organization(s):</li></ul>		\$ \$			
	d. ( ) The Exchange Visitor's Govern	ment	\$			
	e. () The binational Commission of t		\$			
	f. () All other organizations providin g. () Personal Funds	ig support	\$ \$			
			·			

### 6. Exchange visitor's family accompanying him/her:

7.

Name (surname/primary name, given name)	Relationship	Date of birth	City and Country of Birth	Citizenship Country	Permanent Residency Co
				_	
Form DS-2019 will be sent to the sch			f employment in the home	e country. The com	plete mailing address an
Form DS-2019 will be sent to the sch departmental FedEx account number			f employment in the home	e country. The com	plete mailing address an
departmental FedEx account number	must be given l	below.	f employment in the home		plete mailing address an
departmental FedEx account number	must be given l	below.			plete mailing address an
departmental FedEx account number Company name:	must be given l	below.			plete mailing address an
departmental FedEx account number Company name: Street Address:	must be given l	below.			plete mailing address an
departmental FedEx account number Company name: Street Address:	must be given l	below.			plete mailing address an
departmental FedEx account number Company name: Street Address: City:	must be given l	Zip Coc	le:		plete mailing address an

All the following signatures are required if requesting Form DS-2019 to begin a new program, extend a program, transfer to the University of Miami's exchange visitor program, or amend a program:

### UM Departmental Sponsor Requesting Form DS-2019 for Scholar:

(name)	(title)
(signature)	(date)
(campus address)	(tel. #)

### Authorizing Signature of Departmental Chairperson:

(name)	(title)
(signature)	(date)
(campus address)	(tel. #)

# Authorizing Signature of Departmental/Divisional Budget Officer and/or Sponsored Programs (only applicable for scholars who receive UM payment):

(name)	(title)
(signature)	(date)

(campus address)

(tel. #)

For faculty (paid and unpaid) positions and non-faculty, researcher/scientist positions (unpaid): David J. Birnbach, MD, MPH Vice Provost for Faculty Affairs For non-faculty, researcher/scientist positions (paid):

Karen Stimmell Assistant Vice President, Human Resources Submit this request to with required attachments and signatures to: International Student and Scholar Services 1306 Stanford Drive Whitten University Center, Suite 2275 University of Miami Coral Gables, Florida 33146-6929

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