**Form DS-2019 Certificate of Eligibility for Exchange Visitor (J-1)**

**Checklist and Certification**

**Please return this original signed certification along with the original documents listed below to the:**

**International Student and Scholar Office (ISSO)**

**Exchange Visitor (J-1) Application**

**1100 Seaton Hall - #201**

**CC – 0639**

**Please submit all documentation together in one package:**

\_\_\_\_ Form DS-2019 Certificate of Eligibility for Exchange Visitor (J-1) Request Checklist and Certification

\_\_\_\_ Form DS-2019 Certificate of Eligibility for Exchange Visitor (J-1) Exchange Visitor Request Form

\_\_\_\_ Form DS-2019 Certificate of Eligibility for Exchange Visitor (J-1) Host Department Request Form

\_\_\_\_ Form DS-2019 Certificate of Eligibility for Exchange Visitor (J-1) Dependent Information Form (if applicable)

\_\_\_\_ J-1 Exchange Visitor English Proficiency Form (signed)

\_\_\_\_ English Proficiency Documentation

 \_\_\_\_ Recorded video

 \_\_\_\_ Copy of official recognized test score result (International TOEFL, IELTS, TOEIC)

 \_\_\_\_ Diploma from English-speaking country (attach copy of diploma)

\_\_\_\_ Financial Documentation

 \_\_\_\_ Offer letter

 \_\_\_\_ Financial institution letter

 \_\_\_\_ Sponsor statement

 \_\_\_\_ Other

\_\_\_\_ Copy of the passport information page for Exchange Visitor and any dependents

I certify that I have reviewed the complete Exchange Visitor (J-1) Request for DS-2019 application packet, the supporting documentation and the Exchange Visitor Supplemental Information Sheet and that the exchange visitor has met the exchange visitor guidelines and that all information in the application packet is true:

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Printed Name of Requesting Faculty Member Signature Date

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Printed Name of Department Chair/Head Signature Date

Contact person:

For questions regarding this request who should be contacted:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Campus Address

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Phone Number E-mail