

**INVITING A J-1 VISITING
SCHOLAR TO GMU**

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The J-1 Exchange Visitor Program operates under the auspices of the United States Department of State's Bureau of Educational and Cultural Affairs. The purpose of the Exchange Visitor Program is to increase mutual understanding between the people of the United States and the people of other countries by means of educational and cultural exchanges. George Mason University upholds the goals of the exchange visitor program by supporting activities that promote exchange and are of mutual benefit to both George Mason University and the exchange visitor. (Please read page 2 & 3, "Important Information about the J-1 Non-Immigrant status" prior to completing this form)

INSTRUCTIONS

1. Please complete all questions on the "Department Request Form" and return the form and attachments* to OIPS. Allow 3 weeks for preparing DS-2019 Form. Visitor should allow 8-14 weeks (highly variable) for obtaining a visa at US embassy/consulate in home country.
2. Obtain signatures of responsible faculty member and Department Chair for Short-Term Scholar category or the Dean for Research Scholar category
3. *Attach Exchange Visitor's CV
4. *Attach financial support documentation (see part C)
5. *Attach copy of passport identification page (see page 5 for information about dependents)
6. *Attach English Language Verification Form
7. *Brief Research Statement
8. *Export Compliance Form
9. *Proof of J-1 and J-2 health insurance (for extensions only)

Purpose of this Request (Please check one)

- ☐ **New** J-1 (for someone not currently in J-1 status), accompanied by ____ (#) dependents
- ☐ **Extend** Mason-sponsored J-1 program, including ____ (#) dependents

Did Exchange Visitor apply for a lawful permanent resident status or two-year home residency rule waiver? Yes _____ No _____

- ☐ **Transfer** to Mason J-1 program from _____ (current sponsor). Attach I-94 and DS-2019 copies.

OIPS Responsibilities:

OIPS screens prospective exchange visitors to ensure that:

- 1) they are eligible for program participation
 - 2) the program is suitable to the exchange visitor's background, needs and experience
- the exchange visitor possesses sufficient proficiency in the English language to participate in his or her program and sufficient funding

Department/ Host Faculty Responsibilities:

- 1) Notify OIPS immediately of any cancellation or delay in start date of an Exchange Visitor (EV).
- 2) **NEW: Inform OIPS of any incidents listed in APPENDIX A of this form.**
- 3) Provide guidance to participants to enable the EV to complete their objectives, experience the life and culture of the US, share aspects of their home culture with Americans, and to return home upon completion of their program. Monitor research progress and appropriate use of resources, such as access to equipment and labs.
- 4) Ensure that the EV contacts OIPS within 5 days of the start date as listed on the DS-2019 form for visa validation virtual meeting/ orientation. The purpose of the meeting is to validate the EV's SEVIS record, conduct health insurance verification, provide orientation and guidance. If the SEVIS record is not validated within 30 days after official start date, SEVIS automatically cancels the EV's record and permission to remain in the US.
- 5) Provide guidance to participants to enable the EV to complete their objectives, experience the life and culture of the US, share aspects of their home culture with Americans, and to return home upon completion of their program. Monitor research progress and appropriate use of resources, such as access to equipment and labs.
- 6) Remind the EV that there is a mandatory health insurance requirement in order to maintain J-1 status. OIPS verifies compliance with this requirement and can provide information about policies that meet the regulatory requirement. (Note that the University provides insurance coverage only to those who have paid benefited positions).

NEW: From April 2023 OIPS is allowed to digitally sign PDF Forms DS-2019 and email to EVs.

IMPORTANT INFORMATION ABOUT J-1 IMMIGRATION STATUS

The J-1 Exchange Visitor Program is intended to promote the interchange of persons, knowledge, skills, and developments in the field of education, the arts, and sciences; and to promote mutual understanding between the United States and the people of other countries. This program is administered by the Department of State. George Mason University has been designated as an approved "sponsor" of the J-1 program.

The J-1 program is often used by departments desiring to bring professors and researchers to GMU for a limited period of time. George Mason is not authorized to sponsor interns. Individuals sponsored in the scholar or professor category must document credentials equivalent to faculty. The only exception is for those who are doctoral students in the dissertation phase at their home institutions.

The immigration form that is used to enter the U.S. as a J-1 Exchange Visitor is called a form DS-2019. **Before offering a position to a foreign national, it is recommended (not required) to consult with OIPS.**

Time limitations: The total time allowed in J-1 scholar status (PROFESSOR, RESEARCH SCHOLAR) is five years. However, forms can only be generated for three years, with the possibility of a two-year extension. SHORT-TERM SCHOLARS have a maximum of six months. There is a twelve-month bar on program participation as a "professor" or "research scholar" for people that held J immigration status during any portion of the twelve-month period immediately preceding the beginning date on the Form DS-2019. An exemption to the 12-month bar for is granted to J-1s who participated in an exchange visitor program for *six months or less*, or who came as a Short-Term Scholar.

J-1 Program Extensions: The J-1 Responsible Officer has the discretion to extend a participant's program to its maximum regulatory duration, that is, to the limit imposed by the regulations specific to a program category or to a program sponsor's designation. A new Form DS-2019 reflecting the extension is issued to the participant.

Extensions beyond the maximum program duration are allowed in some program categories for exceptional or unusual circumstances, with approval from the Department of State. To obtain approval for such extensions, the Responsible Officer (Exchange Visitor advisor in OIPS) must submit a written request that justifies the petition and provides supporting documentation to the Department of State on behalf of the participant. The request must be accompanied by a nonrefundable fee of \$198 payable to the U.S. Department of State.

Changing Categories: The J-1 Exchange Visitor is not eligible to change J-1 categories, i.e., from "scholar" to "student". The scholar is admitted to the U.S. for the sole purpose of carrying out the program stated on the DS-2019 form.

Accompanying Dependents: Exchange Visitors may request DS-2019 forms for accompanying dependents by documenting the funding to support them while in the US. Note that the medical insurance requirement applies equally to J-2 dependents, who also forfeit their legal status if they do not hold insurance that complies with published federal regulations. The eligibility for a J-2 dependent to enter, and remain in, the United States derives from the legal stay of the J-1 principal participant; therefore the J-1 Exchange Visitor may not travel outside the US while the J-2 dependent remains here. An Exchange Visitor who wishes to travel outside the US for a brief period, typically for reasons associated with his or her J-1 program, should consult with the Exchange Visitor advisor in OIPS.

2-Year Home Residency Requirement: J-1 visa holders (and dependents) are subject to the 2-year home residency requirement under the following conditions:

1. if the scholar's financial support comes totally or in part from the U.S. government, international organizations, or the scholar's home government,
2. if the scholar's country and skills are specifically listed on the "Skills List" (countries where persons with specialized skills are in short supply),
3. if the scholar is a medical trainee.

Medical Insurance Requirement: The Exchange Visitor is required to have medical insurance in effect for him/herself and all accompanying family members from the very first to the very last day in the US. Failure to comply with this requirement may lead to termination of the program.

Providing Support to the J-1 exchange visitor: The faculty member who invites signs the DS-2019 form as the primary responsible party plays an extremely important role in the success of the J-1 program at Mason, with respect to both academic/professional development as well as cultural exchange. To the greatest extent possible, the Exchange Visitor (and dependents where possible) should be invited and included in activities where cultural learning can occur. One of the first challenges for most EV's is the search for housing. OIPS can refer EV's to online resources but we do not provide personal assistance with finding housing, arranging utilities, assisting dependents with school registration, etc.

DS-2019 REQUEST FORM

The information on this REQUEST FORM will be used to enter the Exchange Visitor in the Student and Exchange Visitor Information System (SEVIS) and prepare an official immigration document "Certificate of Eligibility for Exchange Visitor (J-1) Status" for the Exchange Visitor. Legible writing is therefore essential.

Part A: BIOGRAPHICAL INFORMATION

All information is REQUIRED. Please make sure that the spelling of the scholar's name on this form is correct and matches the spelling used in their passport.

1. _____
Family Name **First Name** **Middle Name**
2. ____ **Male** ____ **Female**
3. **Date of Birth:** _____
month/day/year
4. **City of Birth:** _____
5. **Country of Birth:** _____
6. **Country of Citizenship:** _____

7. Country of Permanent Residence: _____

8. Occupation in home country (please provide position title, place of employment and describe type of employment, if known). For students in the dissertation phase of doctoral studies, "Graduate Student" is an appropriate position.

9. If a spouse and/or children will accompany the exchange visitor, the following information is **mandatory** for each dependent (list on a separate page):

- Name of Dependent (LAST NAME, first name, middle name)
- Relationship to J-1 (e.g. spouse, child)
- Gender
- Date of Birth
- City of Birth
- Country of Birth
- Country of Citizenship
- Country of Legal Permanent Residence (usually same as country of citizenship)

Part B: POSITION INFORMATION at GEORGE MASON

1. Specify academic field and type of research, training or professional activity to be conducted at GMU, as well as a description of the proposed activity. This information will be entered on the Form DS-2019:

2. Provide actual location/address of the work to be conducted while on this J-1 program. If the location is not on one of the Mason campuses, please describe the relationship between the off-campus location and the GMU Department:

3. Category of Exchange Visitor (please read and choose carefully):

_____ **Short-term Scholar:** A professor, research scholar, specialist, or a person with similar education or accomplishments coming to the United States on a short-term visit for the purpose of lecturing, observing, consulting, training, or demonstrating special skills at research institutions. May engage in collaborative research. **This is an ideal category for programs and visits of short-term duration lasting anywhere from one day to a maximum of six months. No program extensions will be considered.**

_____ **Research Scholar:** An individual primarily conducting research, observing or consulting in connection with a research project. The research scholar may also teach or lecture, if allowed. 5 years maximum.

_____ **Professor:** An individual primarily teaching, lecturing, observing, or consulting. A professor may also conduct research, if allowed. 5 years maximum.

4. Period of Appointment at GMU: (list complete dates, not to exceed 36 months)

From: _____ **To:** _____
mm/dd/year mm/dd/year

5. If the visitor is already in the U.S., please enclose a photocopy of the current immigration document and U.S. entry visa. The exchange visitor category and subject/field of research and teaching must remain the same to transfer J-1 programs. If the visitor is currently in J-1 status, please complete the following items below:

Location of Current J-1 Program (name of institution, etc.): _____

End Date of Current J-1 Program: _____

6. Is this person an alien physician? ____ yes ____ no

If yes, a certification statement must be completed (see sample in Appendix B) and submitted to OIPS with this form. If there is no patient care or if the patient contact is only incidental, the physician is not required to pass special medical or English language exams. However, written confirmation using prescribed language must accompany the Form DS-2019.

7. Has this person ever been to GMU before this visit? ____ yes ____ no

If so, in what capacity/visa type? _____ (i.e. tourist, student, etc.)

Dates of visit, if known _____

Required QUESTION:

Within the last 24 months, has this person held J status as a Research Scholar or Professor? Yes ☐ No ☐

If yes, specify the dates and list all sponsors:

Part C: FINANCIAL INFORMATION

A financial guarantee for J-1 Exchange Visitors is required by federal law before a form DS-2019 can be made. The minimum maintenance figures needed to meet basic living expenses (excluding health insurance) at GMU are:

\$3,000 per month/**\$36,000** per year for J-1 visa holder with no dependents

\$ 1,200 per month/**\$14,400** per year for spouse (J-2 visa holder)

\$ 600 per month/**\$7,200** per year for each child (J-2 visa holder)

Requests that do not meet the minimum maintenance figure will not be processed. Funding can come from a combination of sources (GMU, personal funds, home government, home institution). **Personal funds only do not qualify.**

The minimum maintenance figures do not include travel to or from the visitor's home country or within the U.S, nor entertainment, health insurance or other discretionary expenses. Visiting Scholars should take into consideration that these estimates are very

conservative and should factor in individual financial requirements when making plans to come to GMU.

Will the scholar be paid by GMU?

☐ **Yes**, the scholar will be paid by GMU

Amount paid:

\$ _____ per _____
(Indicate per month/year/visit)

☐ Check here if this is government money intended solely for the purpose of international educational exchange

☐ **No**, the scholar will not be paid by GMU. Indicate source of funding if other than GMU.

Amount of outside funding:

\$ _____ per _____
(Indicate per month/year/visit)

Source of outside funding:

☐ Check here if this is government money intended solely for the purpose of international educational exchange

Documentation of outside funding must be attached to this DS-2019 Request Form.
(e.g., letter from company or university in home country stating financial support for the scholar; personal bank statement of funds, etc.)

Part D: HEALTH INSURANCE INFORMATION

Will GMU provide health insurance benefits? ____ yes ____ no

If yes, please understand that this scholar will be required to select the health insurance offered that has a \$500 or less deductible per accident or illness. If no, OIPS will provide assistance to the scholar in finding a plan that will meet the J-1 requirements.

REQUIRED SIGNATURES:

REQUESTED BY: _____
(Print or type name of faculty member)

(Signature of faculty member)

Date

By my signature, I affirm the accuracy of the information included on this form. I also acknowledge that I have read, understand, and agree to report incidents listed in the following Appendix A in accordance with 22 CFR 62.13 (d) to OIPS

APPROVED BY: _____
(Print or type name)

(Signature of Dean or Dep. Chair or Director required)

Date

DEPARTMENT/SCHOOL: _____

APPROVED BY: _____

(Print or type name)

(Signature of Dean/Assoc Dean required- COS ONLY)

Date

DEPARTMENT/SCHOOL: _____

APPENDIX A

Sponsors must promptly (on or before the next business day) notify the Department of any investigations of an exchange visitor's site of activity or any serious problem or controversy that could be expected to bring the Department of State, the Exchange Visitor Program, or the sponsor's exchange visitor program into notoriety or disrepute, to include: [22 CFR 62.13(d)]

- **"Actual or Potential Negative Press** (i.e., incident expected to bring DOS, the sponsor, or the Exchange Visitor Program into notoriety or disrepute)
- **Death of Exchange Visitor**
- **Exchange Visitor Missing, Absconder, or Overstay** (i.e., whereabouts unknown or intentionally left the program without notifying sponsor)
- **Foreign Government Involvement** (including Foreign Embassy or Consulate Involvement)
- **Fraud** (e.g., visa, immigration, or financial fraud or scam)
- **Incident Involving the Criminal Justice System** (e.g., arrest, charges, incarceration, detention, or other law enforcement involvement)
- **Incidents Involving Child Protective Services**
- **Lawsuits or Formal Complaints by an Exchange Visitor Against the Sponsor Alleging Unlawful Affirmative Action** (e.g., alleged discrimination in the selection or hiring of exchange visitors based on an unlawful Affirmative Action policy)
- **Lawsuits or Formal Complaints by an Exchange Visitor Against the Sponsor Alleging Unlawful DEI Policies** (e.g., alleged unlawful discrimination against exchange visitors due to Diversity, Equity, and Inclusion policies)
- **Litigation** (Lawsuits) or Other Legal Actions (related to the Exchange Visitor Program, in which a sponsor, site of activity, or an exchange visitor may be a named party)
- **Lost or Stolen Immigration Documents** (e.g., lost or stolen passport/visa or stolen Form DS-2019)
- **Port of Entry Issues** (e.g., applicant found inadmissible resulting in withdrawal of application for admission, expedited removal, or Notice to Appear)
- **Proscribed Antisemitic Actions** (e.g., physical actions directed towards Jewish individuals and/or their property, community institutions, or religious facilities that violates the law or university rules)
- **Public Security Incident or Natural Disasters Directly Involving Exchange Visitor Safety** (e.g., bombing, shooting, other acts of violence, civil unrest, fire, tornado, flood, or hurricane)
- **Serious Behavioral Problems** (e.g., substance abuse, bullying, or harassment)
- **Serious Medical Issues** (e.g., cancer diagnosis, surgery, or any condition requiring hospitalization of 48 hours or more)

- **Serious Mental Health Concerns** (e.g., suicidal ideation or attempt, eating disorder, self-harm, psychiatric hold and/or hospitalization, or early program end due to mental health)
- **Serious Violations of University Conduct Rules:** (e.g., participation in a building occupation, participation in an unauthorized encampment, disrupting classes, intimidation, harassment, assault)
- **Sexually-Related Incident or Abuse** (e.g., incident or allegation involving sexual exploitation, harassment, assault, or misconduct)
- **Terrorist Activity, Endorsing or Espousing Terrorism:** (e.g., engaging in terrorist activity; membership in a terrorist organization; endorsing or espousing terrorist activity)
- **Theft of Intellectual Property or Violations of Import/Export Controls**
- **Unsuitable Host/Work Conditions** (e.g., incident or allegation involving workplace bullying, harassment, discrimination, hostile work environment, or work hours and/or wage-related issues)"

APPENDIX B

FOR ALIEN PHYSICIANS COMING TO GEORGE MASON UNIVERSITY

- **If the J-1 Exchange Visitor coming to George Mason University is an alien physician, and any incidental patient contact will be involved in the duties of the J-1 program,** a statement must be prepared and signed by the dean or dean's designee. It will be attached to the Form DS-2019. The certification statement must contain these 5 points, verbatim:
 - A. "The program in which (name of physician) will participate is predominantly involved with observation, consultation, teaching, or research.
 - B. Any incidental patient contact involving the alien physician will be under the direct supervision of a physician who is a US citizen or resident alien and who is licensed to practice medicine in the state of _____.
 - C. The alien physician will not be given final responsibility for the diagnosis and treatment of patients.
 - D. Any activities of the alien physician will conform fully with state licensing requirements and regulations for medical and health care professionals in the state in which the alien physician is pursuing the program.
 - E. Any experience gained in this program will not be creditable toward any clinical requirements for medical specialty board certification."
- **If NO patient care is involved in the alien physician's duties,** a certification statement must be prepared, signed by the RO/ARO (Director or Assistant Director in OIPS), and attached to the Form DS-2019, stating:

"This certifies that the program in which (name of physician) is to be engaged is solely for the purpose of observation, consultation, teaching, or research and that no element of patient care services is involved."

Case notes to OIPS, if any:
