
USF College of Medicine Visiting Student DS-2019 REQUEST FORM 2009/2010

International Services is responsible for administering, approving and signing all documentation connected with the Exchange Visitor Program at the University of South Florida (P-1-03445). The Exchange Visitor Program brings qualified students, professors, research scholars, short-term scholars, and specialists to the United States for a variety of educational purposes.

College of Medicine visiting students will engage in a electives and observation as described in the application for admission found at http://hsc.usf.edu/medicine/registrar/new/visiting_students.htm . This form is ONLY for students in a USF College of Medicine program pursuant to a written agreement between USF and a foreign educational institution.

Eligibility requirements, Issuing Form DS-2019 and obtaining the J-1 Visa

Prior to issuing the DS-2019 form, it must be verified that the visiting student meets the following:

- The student has been admitted as a visiting student at USF College of Medicine;
- The student possesses English language proficiency;
- The student shows adequate funding for the length of the program for self and any dependents.
 - The current estimate for housing, meals, transportation, and personal expenses = **\$18,373/year (\$1531 per month)**
 - An additional **\$5000/year (\$417.00/month)** each for a spouse and children, if planning to bring dependents in J-2 status.

Issuing Form DS-2019

International Services will issue a DS-2019 within **10 business days** of receipt by our office of a completed DS-2019 Request Form signed by the USF College of Medicine Registrar and College Dean's office. Forms are forwarded to the College of Medicine Registrar for mailing to the student's home address.

Obtaining the "J" Visa

The student must pay the SEVIS fee (I-901) <http://www.ice.gov/sevis/i901/index.htm> prior to their J-1 visa appointment at the nearest U.S. Embassy or Consulate. If the Consular Office determines that the person is a bona fide exchange visitor, the J-1 visa will be granted and the student and dependents may enter the US up to thirty days before program begins.

The Two Year Home Residency Requirement

Upon completion of an exchange visitor program in the United States, certain J-1 exchange visitors are required to live in their home countries for a period of 2 years before they are eligible to apply for immigrant status or for other nonimmigrant status. The 2 year home country residence requirement applies to those Exchange Visitors who (1) are financially supported by the U.S. government or their home governments; or (2) have skills which are needed in their home countries, as specified on the Exchange Visitor Skills List; or (3) are medical doctors who have graduated from a foreign medical school and have come to the United States to study or work in the field of medicine. The purpose of the home country residence requirement is to enforce the return of exchange visitors in order to carry out the educational exchange objectives of the program.

Change of Educational Objective/Exchange Visitor Category

A J-1 student is not allowed to change his/her educational objective in the United States. This includes change from one J-1 category to another, e.g. from student to professor/researcher or from non-degree to degree seeking student.

Employment

On-campus employment for students must be approved by International Services prior to commencement of the job. It is limited to 20 hours per week while school is in session.

Insurance

All J-1 students and their dependents must enroll in a health insurance program that meets the U.S. government requirements and the state of Florida mandated requirement including major medical coverage, medical evacuation, and repatriation benefits. For information on requirements, go to www.global.usf.edu/iss/scholars

Sponsoring Department Responsibilities

The department agrees to notify International Services if the student is delayed, to bring/send the student to International Services upon arrival for collection of immigration documentation and proof of health insurance as required by law, and to contact our office prior to completion of program.

All students will receive university ID numbers that allow access to computers, email, and the library. The department must arrange for an email address for NET ID access.

Please complete and forward with the copies of the student's passport and financial documentation to International Services; CPR 107:

Name of Student: _____ Male
Family Name (as in passport) First Name Middle Name Female

Date of Birth: _____ Place of Birth: _____
Month/Day/Year City Country

Citizens of: _____ Legal Permanent Resident of: _____
Country Country

What evidence do you have that this student has adequate English skills to function as a visiting non-degree student in your department?
(examples: personal conversation or TOEFL score) _____

Has the student held J-1 or J-2 immigration status at any institution in the past 12 months? Yes No
If yes, give dates and locations of all visits in the last 12 months _____
If student is currently in the US attach copies of all previous DS-2019 forms.

Will the student be accompanied by spouse and/or children? Yes No
If yes, submit copies of the biographical page of the passport for each and provide the following for each family member on a separate sheet of paper: city and country of birth, relations to J-1 (spouse or child)

Student's Mailing Address in Home Country: _____

Student's Email Address: _____

Please state the student's educational object, major area of study and planned activities as a non-degree seeking student.

Dates of Program: Begin _____ End _____
Month/Day/Year Month/Day/Year

During this period, financial support in US Dollars will be provided to the student by (must verify funding with official letters or bank statements, if from any source other than USF department):

<input type="checkbox"/> The University of South Florida	\$ _____
<input type="checkbox"/> U.S. Government Agency: Name of Org or Code _____	\$ _____
<input type="checkbox"/> International Organization: Name of Org or Code _____	\$ _____
<input type="checkbox"/> The Exchange Visitor's home government	\$ _____
<input type="checkbox"/> The Bi-national Commission of the visitor's country	\$ _____
<input type="checkbox"/> All other organizations providing support: Name: _____	\$ _____
<input type="checkbox"/> Additional Personal Funds: (Bank certification or statement required)	\$ _____

As the Department Sponsor of this Exchange Visitor, I hereby attest that the information included in this application is correct to the best of my knowledge:

College of Medicine Registrar: _____ Phone: _____

College of Medicine Address: _____

Signature of approval College of Medicine Registrar: _____

Printed Name of Registrar: _____ **Date:** _____

Signature of approval Dean: _____ **Date:** _____

Name of College Dean: _____

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Exchange Visitor Health Insurance Verification:

According to Federal Regulation 22 CFR 62.14, each J-1 exchange visitor is to have insurance in effect, which covers the scholar and his or her dependents for sickness or accident during the period of participation in the exchange visitor program.

You must carry health insurance for the full duration of your J program as determined by your selected participation dates. These dates will appear on your DS-2019 form.

Government regulations stipulate that if you willfully fail to carry health insurance which meets the minimum federal requirements for yourself and your dependents, USF must terminate your program, and report the termination to the United States Department of State in Washington, DC. If you fail to carry the required health insurance you will be considered to be "**out of status**" and ineligible for extension of stay, employment, or change of status.

Please review your current policy to determine whether or not health insurance purchased in your home country or elsewhere meets the minimum requirements. International Services at USF does not have the authority to waive these Federal requirements for any Exchange Visitor and dependents. The following requirements meet the Federal insurance regulations.

Minimum levels of coverage must provide:

- a) Medical benefits of at least US\$50,000 per accident or illness;
- b) Repatriation of remains in the amount of US\$7,500;
- c) Expenses associated with medical evacuation to the home country in the amount of US\$10,000;
- d) A deductible not to exceed US\$500 per accident or illness.

You must show proof of health insurance that meets the above minimums when you arrive in the US and check-in with International Services. USF Student Health Services has a policy available for purchase upon arrival that meets the J Program requirements. Information and costs of this policy is available at <http://www.shs.usf.edu/insurance/20082009-international-student-health-insurance.aspx>

I am in compliance with the above mentioned insurance requirements for myself and my dependents and will maintain this required insurance coverage during my entire stay at the University of South Florida. I have enclosed a copy of my current health insurance card showing coverage for the requested extension period.

Exchange Visitor Name: _____

Signature: _____ Date _____