

In order to determine whether your prospective student-intern is eligible for this particular visa category, the ISAO J-Scholar Advisor needs to review the following information carefully. Please complete all sections of this form and return it to ISAO along with the English Proficiency Form and DS-7002 Information Form.

Upon review, the ISAO J-Scholar Advisor will either approve the prospective student-intern’s eligibility or suggest an alternative visa category/type for the student. If approved, the advisor will provide your office with documentation for the next steps to invite the student-intern to UMKC.

If you have completed the VISA GUIDANCE FORM with ISAO, what is the J-1 Student-Intern program number as listed on your approved guidance form? _____

TO BE COMPLETED BY UMKC HOST DEPARTMENT

DEPARTMENT INFO:

DEPARTMENT:	_____		
CONTACT PERSON:	_____		
	(name)	(email)	(phone)
FACULTY MENTOR:	_____		
(if different from above)	(name)	(email)	(phone)

PROSPECTIVE STUDENT-INTERN BIOGRAPHICAL INFO:

FULL NAME:	_____	
(as printed in passport)	(Surname/Family/Last Name)	(First/Given Names)
DATE OF BIRTH:	_____	GENDER: <input type="checkbox"/> Male <input type="checkbox"/> Female
	(Month/Day/Year)	
CITY OF BIRTH:	_____	COUNTRY OF BIRTH: _____
COUNTRY OF CITIZENSHIP:	_____	COUNTRY OF PERMANENT RESIDENCE: _____
EMAIL ADDRESS:	_____	

PROSPECTIVE STUDENT-INTERN EDUCATION INFO:

HIGHEST EDUCATION LEVEL COMPLETED OR IN PROGRESS:		EXPECTED GRADUATION DATE: _____
<input type="checkbox"/> Bachelor’s	<input type="checkbox"/> Master’s	<input type="checkbox"/> Doctorate
<input type="checkbox"/> Other		
FOREIGN INSTITUTION:	_____	
	(name)	(city, country)
FIELD OF STUDY/MAJOR:	_____	
INTERNSHIP START DATE:	_____	INTERNSHIP END DATE: _____
	(Month/Day/Year)	(Month/Day/Year)

UMKC HOST DEPARTMENT - STATEMENT OF RESPONSIBILITIES & CONDITIONS

Department Responsibilities

The sponsoring department is responsible for providing cultural and professional exchange opportunities for the visiting intern, including exposure to American technique methodologies and expertise; to expand upon existing knowledge and skills; and to promote international exchange between U.S. and intern's home country.

English Language Skills

Sponsoring departments must ensure that interns have verifiable English language skills sufficient to function on a day-to-day basis in their internship environment. English language proficiency must be verified through an interview conducted by the sponsoring department or through TOEFL/IETLS scores.

Mandatory Visa Check In

J-1 Student Interns must check in with ISAO within 15 days of their program start date. If the intern does not check in within that time frame, the student intern's status will be "terminated" through the Student Exchange Visitor Information System (SEVIS) and the intern will not be eligible to engage in his/her program at UMKC or legally remain in the U.S. In the case that the intern's arrival is delayed, the sponsoring department should notify ISAO and request that the program start date be postponed.

Health Insurance Requirement

The student intern must show proof of health insurance coverage, with a minimum of \$100,000 per person per accident or illness; repatriation of remains in the amount of \$25,000; expenses associated with medical evacuation in the amount of \$50,000; and a deductible not to exceed \$500 per accident or illness. The student intern must continue to keep health insurance for the entire duration of time spent in the U.S. as a J-1 visa holder.

Program Plan Changes and/or Employment Restrictions

The J-1 Student Intern category is authorized to engage only in those activities, including employment, as described in the **T/IPP (DS-7002)**. The intern is **not** authorized to change programs or work in other positions unrelated or not included in the DS-7002. Any changes to the internship program or training plan must be reviewed by ISAO and approved prior to the intern's engaging in those activities.

Evaluations

All evaluations must be completed prior to the conclusion of the internship program. Programs exceeding 6 months in duration require midpoint and concluding evaluations. Programs of 6 months or less require concluding evaluations only. Sponsoring faculty must be current on all evaluations. Please note that meeting the requirements of evaluations are the responsibility of the sponsoring department. If the sponsoring department does not meet the requirement to submit a timely, thorough evaluation, this may lead to termination of the intern's J-1 visa.

Extensions of the Internship

Extensions are not possible beyond the 12-month maximum program duration established by the U.S. Department of State. If an extension request is made on behalf of the Student Intern, a completed intern evaluation must be submitted with the request for a program extension along with a new DS-7002 (T/IPP) form.

Notice of Departure

Sponsoring faculty/staff are responsible to notify ISAO of the student intern's departure at the completion of the program. If the student intern's program is not properly reported as "completed" through SEVIS, it may jeopardize the intern's future visits to the U.S.

I hereby certify that I have read "Statement of Responsibilities & Conditions" and agree to fulfill all requirements

Printed Name of Sponsoring Faculty	Signature	Date
HOST DEPARTMENT: _____	PHONE: _____	E-MAIL: _____
DEPARTMENT CHAIR/HEAD: _____	PHONE: _____	E-MAIL: _____

TO BE COMPLETED BY PROSPECTIVE STUDENT-INTERN

STUDENT-INTERN QUESTIONNAIRE:

Please answer the following questions with either YES or NO:

- | | | |
|---|------------------------------|-----------------------------|
| 1. I have been in the United States in the J-1 Student-Intern category in the past. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 2. I am currently in the United States.
If YES, provide copies of your current immigration documents | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 3. I have been in the United States on a J-1 visa in the LAST 12 MONTHS.
If YES, provide copies of your previous DS-2019s and visa stamp
If YES, also provide the following: | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| a. Name of Responsible Officer (or Alternate Responsible Officer):
_____ | | |
| b. Email address for RO/ARO:
_____ | | |
| c. Phone number for RO/ARO:
_____ | | |
| 4. My dependents (spouse and/or children under 21 years of age) will accompany me. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 5. I have a passport that is valid for 6 months beyond the requested end date of my program. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 6. I understand that the primary objective of my visit to UMKC is to engage in a full-time internship of at least 32 hours per week. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 7. I am currently enrolled in a post-secondary academic institution outside of the United States, and I am in good academic standing at my institution. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 8. The internship I am seeking at UMKC fulfills educational objectives of my current academic program at my home institution. My dean or academic advisor will write a letter of support to confirm this. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 9. After completing this Student-Internship Program, I will return to my home institution to complete my degree requirements. | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 10. I have sufficient ability in the English language in order to function on a daily basis.
NOTE: Evidence of English ability is required of all J Exchange Visitors | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

ATTESTATION OF PROVIDED INFORMATION:

✓ I certify that the information provided in this application is complete and true to the best of my knowledge.

Signature of prospective student-intern

Date (month/day/year)