

Professor, Research Scholar, Student Intern DS-2019. DS-7002

Update. Jan. 17, 2022

Instruction for J-1 Visa Sponsorship Application

Form DS-2019 Certificate of Eligibility for Exchange Visitor Status

All J-1 exchange visitors must obtain a Form DS-2019, Certificate of Eligibility for Exchange Visitor Status in order to apply for a J-1 visa to enter the U.S. or to transfer from other J-1 sponsoring institutions to Midwest University. The International Office of Midwest University is responsible for issuing Form DS-2019 through the Student & Exchange Visitor Information System (SEVIS), the web-based computer system used by the U.S. Department of Homeland Security to track and monitor international students, scholars, and programs. Please complete the application forms.

Application Deadline: SIX WEEKS BEFORE ARRIVAL DATE of exchange visitor

From receiving the Form DS-2019 at home country to schedule an interview with a U.S. Consulate to apply for a J-1 visa, to make travel plans, and to finally arrive on campus, an exchange visitor needs a minimum of five weeks. International Office needs 3-5 business days to process the application, depending on the workload of the time the application is submitted. **Visitors should Not schedule visa interview with a U.S. Consulate until receiving confirmation that the DS-2019 has been mailed.** Please plan early and submit completed application to International Office **SIX weeks before** the arrival date. Your cooperation is greatly appreciated.

Application Fee Information (Non-Refundable)

* J-1 DS-2019 Application fee USD \$ 1,040

* J-2 Dependent USD \$ 240 (per person)

- The application fee must be paid at the time you submit the application and cannot be submitted separately
- The application cannot be processed or reviewed by Midwest International Research Institute (MIRI) unless the application fee has been paid
- Applications received without the application fee at the time of submission will be considered incomplete and cannot be processed.

Project Fee: The project fee must be paid within one week of receiving the US visa.

Pay To: Midwest University Bank Account information is provided as below: Bank: US Bank

Routing Number: 081000210 Account Number: 152315109230 Sift Code: USBKUS44IMT

Address: 1 Lake St. Louis Blvd., Lake St. Louis, MO 63367 U.S.A

• Once admitted, a DS-2019 form will be generated for you to use to obtain a visa to study / reserrach in the U. S. This document will be mailed to YOU via express mail unless otherwise instructed.

Midwest International Research Institute (MIRI)
Midwest University

851 Parr Rd., Wentzville, MO 63385 U.S.A. Tel: 1-636-327-4645 Email: miri@midwest.edu



1. The purpose of this request:		Professor and/or Researcher			xtension for 1 year xtension for 2 years		
		Student-Intern			xtension for 3 years		
2. Personal Information	:				, and the second	Attach 2 recent 2x2 sized photos of yourself here	
(Last or Family	Name)		(First Name)	(N	Middle Name)	yoursen here	
Gender: Male Female Date		Date of Birtl	h:(mm/dd/yyyy)				
E-mail Address:							
City of Birth 출생도시명:Country of Birth 출생국가:							
Country of Citiz	enship		Passport Number		Passport Expiration	Date(mm/dd/yyyy)	
3. Current Address:							
(all documents will be	Street Ad	dress					
sent to this address)	City		State(if necessary for	mail)	Country	Postal Code	
	Telephone		Mobile Phone			Email	
4. Permanent Address							
Check here and do	Street Ad	dress					
		ity	State(if necessary for	State(if necessary for mail)		Postal Code	
	Telephone		Mobile Phone		E	Email	
5. Emergency Contact							
(must be a relative	Full Nam	ie	Relationship to You				
(must be a relative, spouse, or legal guardian)	Street Ad	dress					
	C		State(if necessary for	mail)	Country	Postal Code	
	Telephone		Mobile Phone			Email	
6. Present of Former Position in the country of permanent residence: (For example: Is he/she a professor, researcher, graduate student, government employee/administrator, in the private sector? Please give a aconcise description.)							
Has been a J-1 scholar in the US? Yes No End date of most recent J-1 program:							
Previous J-1 Sponsor organization name:							
Previous J-1 Sponsor contact information:							
7. Religion Background							
_	Christianity Buddhism No Religion Other()		

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8. J-1 Program	m Dates:	From:	То:			
			(mm/dd/yyyy))	(mm/dd/yy	yy)
List the total of time, up to a maximum of five years (Professor or Research Scholar) or six months (Short-Term Scholar), for which the activities have been mutually agreed to and for which funding has been assured.						
9. Title of Pro	posed Res	earch:				
10. Brief, Con	cise and n	on-technical I	Description of yo	our proposed research:		
For example: 1	Research in	n the field of ve	eterinary pathobio	ology, research in mathemat	tics, etc.	
11. Source an	d amount	of financial su	pport:			
				an offer letter or, if the supp on before we can prepare th	_	n the home institution or agency, ents.
• Midwest University *		\$ Source:				
*(include dep	oartment gr					
Exchange visitor's governmentOther organizations (please list)		\$ \$		Source:		
 Personal funds* *(Please attach proof of personal funds: 			\$			
bank state	-	•	•			
		nily Members:		ompany him/her to MU, we	e must also issue to	o the exchange visitor a
-		•				ships to the exchange visitor and
the dates and places of birth (city and country). Each dependent will be issued his/herJ document, DS-2019, as a J-2 dependent.						
Dependent #	<u> </u>		<u></u>		Т	
(Last or Family Name)		(First Name)		(Middle Name)		
Relationship:	or ranning	(vanic)	Date of Birth:	(2.1130.1.(0.1130))	Place of Birth:	(**************************************
•	Spouse, D	aughter, Son		mm/dd/yyyy	Trace of Birtin.	City & Country출생도시&국가
Country of Citizenship		Passport Number		Passport Expiration Date (mm/dd/yyyy)		
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Dependent #2						
(Last or Family Name)		(First Name)		(Middle Name)		
Relationship:	Spouse, Daughter, Son	Date of Birth:	mm/dd/yyyy	Place of Birth:	City & Country 출생도시&국가	
Coun	try of Citizenship	Passport Number		Passport Expiration Date (mm/dd/yyyy)		
Dependent #3						
(Last or Family Name)		(First Name)		(Middle Name)		
Relationship:		Date of Birth:		Place of Birth:		
-	Spouse, Daughter, Son		mm/dd/yyyy		City & Country 출생도시&국가	
				'		
Country of Citizenship		Passport Number		Passport Expiration Date (mm/dd/yyyy)		
Dependent #4						
(Last or Family Name)		(First Name)		(Middle Name)		
Relationship:	Spouse, Daughter, Son	Date of Birth:	mm/dd/yyyy	Place of Birth:	City & Country 출생도시&국가	
Country of Citizenship		Passport Number		Passport Expiration Date (mm/dd/yyyy)		
Note: If more space is needed, please attach an extra sheet of paper. Be sure that all names are spelled correctly and exactly as they are in the individual's passport. A misspelling of a name can lead to a visa denial.						

13. Insurance Coverage (Medical, Evacuation, & Repatriation)

- Medical benefits of at least \$100,000 per person per accident or illness
- Expense associated with medical evacuation in the amount of \$50,000
- Repatriation of Remains in the amount of \$25,000
- A deductible not to exceed \$500 per accident or illness

Note: PParticipantsarticipants in the J-1 Exchange Visitor program are required to have medical insurance that covers them for sickness or accident during the period periodthey are participating in MU's exchange visitor program. The Exchange visitor must provid proof of insurance as indicated above to the office of International Affairs within two weeks of the start of the program listed on the Exchange Visitor's DS-2019.



IMPORTANT: TWO-YEAR HOME COUNTRY PHYSICAL PRESENCE REQUIREMENT

Some J-1 Exchange Visitors and their J-2 dependents may be affected by a provision referred to as the "two-year home country physical presence requirement." This means that after completing his/her program in the U.S. as outlined on the Form DS-2019, an Exchange Visitor must return to his/her home country for two years. This requirement usually applies to the following:

1) Exchange Visitors whose programs are financed in whole or part, directly or indirectly, by the U.S. or home country government and or a foreign sponsor2) Exchange Visitors whose country and field of specialized knowledge (skills) are listed in the most recent "skills list" published by the U.S. Department of State; 3) Exchange Visitors who are receiving graduate medical education or training in the U.S.A. waiver of this requirement may be possible. This special characteristic of J-1/J-2 status should be clearly understood by the J-1 Exchange Visitor. Any questions regarding this matter should be discussed with the International Office of Midwest University.

Attach ALL documents listed below and email to miri@midwest.edu:

- 1. Copy of the bio-page of your and your dependents' passports showing legal name, date of birth, city of birth, country of birth, gender, and expiration date.
- 2. If not funded by Midwest University, provide the proof of funding and/ or sponsor (i.e., a letter from an employer, private sponsor including parents, or yourself.
- 3. Proof of **health insurance coverage** for full period of DS-2019.
- 4. Your very brief research/teaching plan (less than half page).
- 5. Your CV/resume.
- 6. Your official transcripts and/ or degree certification.
- 7. Funding for dependents if coming: please provide original financial documents of \$5,000/year for spouse plus \$3,500 for each child \$
- 8. Copy of marriage certificate in ENGLISH (must be an official legal translation).

I attest that I have read and understood the information above.				
	-			
Signature		Date(mm/dd/yyyy)		

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