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J-1 EXCHANGE VISITOR APPLICATION

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

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.

Maximun Time Period of Visa Sponsorship

* The total time period visa sponsordhip could be 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.

Application Fee Information

* J-1 DS-2019 Application fee USD \$1,040 Non refundable * J-2 Dependent USD \$240 (per person) Non refundable

- 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.

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 /research 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 Fax: 1-636-327-4715. Email: miri@midwest.edu



J-1 EXCHANGE VISITOR APPLICATION

1. The purpose of this request:		Program Date: (mm/dd/yyyy)	Preferred City			
Professor and/or Researcher		From: To:	1.			
Student-Intern		10.	2.		A441-2	
2. Personal Information:					Attach 2 recent 2x2 sized photos of yourself here	
(Last or Family Name)		(First Name)	(Midd	lle Name)	yoursen here	
Gender: Male F	Female	Date of Birth: (mm/dd/yyyy)				
E-mail:			Ph	ione:		
City of Birth 출생도시:		Country of	Birth 출생국가:			
Country of Citiz	enship	Passport Numb	er Pa	assport Expiration Da	te (mm/dd/yyyy)	
3. Current Address:						
(all documents will be	Street Ac	dress				
sent to this address)		ity State(if necessary for mail) Country		ountry	Postal Code	
	Email F				one	
4. Permanent Address:						
	Street Ac	dress			_	
Check here and do		G (10	2 11)			
not complete if the information is the same	C	ity State(if necessary t	for mail)	Country	Postal Code	
	Em	ail		Phor	ne	
5. Emergency Contact:						
	Full Nan	ne	Relationship to	You		
(must be a relative, spouse, or legal guardian)	Street Ac	ldress				
<i>3</i> ,	City State(if necessar		for mail)	Country	Postal Code	
	Email		Pho	one		
	professor	he country of permanent residence: , researcher, graduate student, gove		ninistrator, in the priva	ate sector? Please	
Has been a J-1 scholar in	the US?	Yes No End da	te of most recent J-1 pr	ogram:		
Previous J-1 Sponsor orga	nization na	ame:				
Previous J-1 Sponsor cont	act inform	ation:				
7. Religion Background	Your	Religion: Christianity B	uddhism No Rel	ligion Other()	

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J-1 EXCHANGE VISITOR APPLICATION FORM

8. Title of Proposed Research:					
9. Brief, Concise and non-technical D	escription of yo	ur proposed research:			
For example: Personal in the field of w	otorinory nothobi	alogy recental in mathematic	tios ata		
For example: Research in the field of v	etermary pathoon	ology, research in mathemat	iics, etc.		
10. Source and amount of financial support: Please note that this must be documented in the form of an offer letter or, if the support is coming from the home institution or agency, documentary evidence must be attached to this application before we can prepare the scholar's documents.					
Midwest University * \$ Source: *(include department grant funding)					
• Exchange visitor's government	\$ \$		Source:		
• Personal funds*	• Personal funds* \$				
*(Please attach proof of personal funds bank statements, for example)	*(Please attach proof of personal funds: bank statements, for example)				
11. Accompanying Family Members: If the exchange visitor's spouse and/or of	children will acco	ompany him/her to MU, we	must also issue to	the exchange visitor, a	
certification listing the names (as they appear in their passports) of the family members, their relationships to the exchange visitor and the dates and places of birth (city and country). Each dependent will be issued his/her own J document, DS-2019, as a J-2 dependent.					
the dates and places of birth (city and co	ountry). Each dep	bendent will be issued his/he	er own J documen	t, DS-2019, as a J-2 dependent.	
Dependent #1					
(Last or Family Name)		(First Name)		(Middle Name)	
Relationship: Spouse, Daughter, Son	Date of Birth:	mm/dd/yyyy	Place of Birth:	City & Country출생도시 & 국가	
	I		<u> </u>	, , , 	
Country of Citizenship	Pass	sport Number	Passport Exp	iration Date (mm/dd/yyyy)	

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Tel: 1-636-327-4645 Fax: 1-636-327-4715, Email: miri@midwest.edu



J-1 EXCHANGE VISITOR APPLICATION FORM

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	
	600		(N. 1			
	try of Citizenship	Passport Number		Passport Expiration Date (mm/dd/yyyy)		
Dependent #3		Г				
(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 #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)		
	space is needed, please a			all names are spelle	d correctly and exactly as they are	
12. Insurance	Coverage (Medical, Ev	acuation, & Rep	atriation)			

- 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: participants in the J-1 Exchange Visitor program are required to have medical insurance that covers them for sickness or accident during the period of time they 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.

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J-1 EXCHANGE VISITOR APPLICATION FORM

IMPORTANT: TWO-YEAR HOME COUNRY 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 sponsor; 2) 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 cluding parents or yourself.
- Proof of health insurance coverage for full period of DS-2019. 3.
- 4. Your very brief research/teaching plan (less than half page).
- 5. Your CV/resume.
- 6. Your official transcripts and/ or degree certication.
- Funding for dependents if coming: please provide original financial documents of \$5,000/year for spouse plus \$3,500 for each child \$

Signature Date (mm/dd/yyyy)
I attest that I have read and understood the information above.
8. Copy of marriage certificate in ENGLISH (must be an official legal translation).

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