



SMU®

International Student & Scholar Services Office.

DS-2019 REQUEST FORM

DEPARTMENT CHECKLIST FOR DS-2019 REQUEST AND PACKAGE

_____ DS-2019 request form is complete with all required fields filled in. This includes all necessary data in ACCESS.SMU (CITY OF BIRTH MUST BE ENTERED) .

_____ The Exchange Visitor must show proof of health insurance documentation.

_____ Access ID number. If Exchange Visitor is a Scholar/Professor then you MUST contact the SMU Human Resources to get the Access ID number.

_____ Copy of Exchange Visitor's passport with the page that has their name and picture. Faxed copies or other electronic transmissions are fine as long as they are legible.

_____ Acceptance/Appointment letter from issuing department (Scholars only: must be a non-tenure track position).

_____ Proof of funding or financial documents like bank statements, letters, etc. If Exchange Visitor will be on scholarship or assistantship please enclose the award letter. If exchange visitor is a non-student scholar the financial information must be in the offer letter stating salary or honorarium. No additional financial documentation is needed for scholars if salary or honorarium information is in the offer letter.

Please note: Incomplete DS-2019 request packages WILL NOT be processed. They will be returned to the department by campus mail for completion. If you have any questions please contact us by email at: smuint@mail.smu.edu. Thank you.

**IF J EXCHANGE VISITOR IS BRINGING
DEPENDENTS PLEASE PRINT DS-2019 REQUEST
FOR DEPENDENTS:**

<http://smu.edu/international/forms/DS%202019%20Request%20for%20Dependent.pdf>

Revised 02/07/2012 CG

Today's Date: _____

Please complete **ALL** information below and return this form to the SMU International Office:

You must check the one that applies on next line!

New Student/Scholar Transfer Returning Student/Scholar Update Student/Scholar

Has the exchange visitor been in the U.S. as a Professor, Scholar or Researcher in the past?
Yes ____ No ____

If yes, how long ago? _____

PLEASE NOTE: IF A PROFESSOR, RESEARCHER OR SCHOLAR HAS BEEN IN THE U.S. IN THIS CATEGORY PREVIOUSLY, HE OR SHE CANNOT PARTICIPATE AS A RESEARCHER, PROFESSOR OR SCHOLAR AT SMU UNTIL TWO YEARS HAVE GONE BY.

REQUESTS FOR TRANSFER DS-2019S ARE REQUIRED TO SUBMIT A TRANSFER CLEARANCE FORM. THEY MUST ALSO BE RELEASED IN THE SEVIS SYSTEM FROM THE PREVIOUS INSTITUTION BEFORE DS-2019 CAN BE ISSUED.

If transfer, at which U.S. Institution _____

IF AN EXCHANGE VISITOR WILL BE IN THE U.S FOR 6 MONTHS OR LESS, IT IS ADVISED THAT THE EXCHANGE VISITOR PARTICIPATES AS A SHORT TERM SCHOLAR. PLEASE NOTE THAT A SHORT TERM SCHOLAR'S PARTICIPATION CANNOT BE EXTENDED FOR MORE THAN 6 MONTHS, AND MUST LEAVE THE U.S IN ORDER TO RETURN TO PARTICIPATE IN A NEW PROGRAM. IF UNCERTAIN, CALL THE INTERNATIONAL CENTER TO DISCUSS.

Dept Representative _____ Phone _____ Contact Person _____

Exchange Visitor Access #: _____ - _____

(FAMILY NAME AS STATED ON PASSPORT) (FIRST NAME AS STATED ON PASSPORT)

(Middle Name, if applicable) (Suffix, if app.)

DATE OF BIRTH: ____ - ____ - ____ GENDER (Check One): MALE FEMALE
Month Day Year

CITY OF BIRTH: _____

COUNTRY OF BIRTH: _____

COUNTRY OF CITIZENSHIP: _____

COUNTRY OF LEGAL PERMANENT RESIDENCY: _____

POSITION IN HOME COUNTRY _____

EXCHANGE VISITOR CATEGORY (Check One):

Student Professor Research Scholar Short Term Scholar (6 months maximum)

If Student, EDUCATION LEVEL ADMITTED TO SMU FOR (Check One):

Bachelors Masters PhD Artist Certificate Program Intensive English only

SUBJECT/FIELD of STUDY or RESEARCH at SMU:

_____ (Students and Scholars)

HOME COUNTRY ADDRESS:

MAILING ADDRESS (**DO NOT USE** P. O. BOX) If different from Home Country Address:

Required Phone # _____

Email Address _____

DOCUMENTS WILL BE SENT BY UPS UNLESS OTHERWISE SPECIFIED.

REQUESTED: DEPT. MAIL Code (Required) _____

ADDRESS of SITE OF ACTIVITY (This will be your department physical address or the address or site at SMU on or off campus where J-1 will be working/studying) [Note: if more than one site of activity you must attach additional sheet as necessary to indicate additional sites of activity with physical addresses!]:

SITE OF ACTIVITY ADDRESS (**DO NOT USE** P. O. BOX):

Phone _____

Email _____

THIS REQUEST COVERS THE PERIOD FROM: ____ - ____ - ____ TO ____ - ____ - ____

The completion date is the estimated graduation date for students or the projected completion date of the project for scholars. If student, please give the length of program here: (Wk, Mos, Yr)

FUNDING INFORMATION

Funds from SMU: \$ _____ (specify type) _____

SMU has ____ has not ____ received funding for international exchange from one or more U.S. government agencies to support this exchange visitor. **IMPORTANT:** If the exchange visitor will be getting his/her paycheck from SMU this must be marked 'has not'. Mark 'has' only if the exchange visitor will be getting their paycheck directly from a U.S. government agency rather than SMU. If any U.S. government agency is providing funding, please explain: (Use back if more space is needed)

Any non-SMU funds must be reported here:

U.S. Government agency (max. of two): _____
Amount \$ _____

2nd U.S. Government agency (if app.): _____
Amount\$ _____

International Organizations (max. of two): _____
Amount \$ _____

2nd International Organization (if app.): _____
Amount\$ _____

Exchange visitor's government: \$ _____

Bi-national commission of visitor's country: \$ _____

Other organizations providing support: \$ _____

Personal funds: \$ _____ **IMPORTANT:** Personal

funds can only be used if the student or scholar is part of a mutual exchange with an SMU student and will be at SMU for two semesters at most. They can also be used to supplement other non-personal or family funding if this personal or family funding WILL NOT be the primary source of funds, i.e., student is on \$15,000 per year scholarship and assistantship from SMU but needs an additional \$2,000 to meet the financial certification requirements estimated by the department. If this person will be funded primarily by personal or family funding to come to SMU this person must come on an I-20 and NOT a DS-2019.

NOTICE TO DEPARTMENT/STUDENT OR SCHOLAR

*The term "Immediate Family" means family members who are dependents of the student/scholar, i.e., sons, daughters, or married husband or wife. The U.S. Government WILL NOT allow other family members who are not mentioned above, i.e. cousins or uncles, to enter the U.S. on dependent J-2 visas. Only immediate family members (dependents) can join the student/scholar during the student's/scholar's entire stay in the U.S. Any other family members wishing to come would have to come in on visitor visas and could only stay a shorter time.

Researchers (non-students) who enter the United States for a program of less than 6 months duration are considered "Short-Term Scholars". They can be here to do research and/or teach as both duties are often intertwined in academia. **However, as a Short-Term Scholar their J-1 visa status (DS-2019) cannot be extended beyond 6 months! They would have to leave the U.S. after 6 months. A short-term scholar must not have any plans to stay beyond 6 months.