



# Request for DS-2019 Application Packet (Instructions)

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## J-1 Exchange Visitor Categories

- **Professors**: may remain in the U.S. for up to five years.
  - J-1 visiting professors or scholars may take classes if they are admissible under normal procedures of departmental admitting committees and the University's Admission Office. However, in accordance with the U.S. State Department policy, they are **not** able to extend their stay in the United States beyond their specific program maximum. Thus, it is very important that an exchange visitor who is a likely Ph.D. candidate receive a student DS-2019 form. This would allow them to stay in the United States until they graduate with their degree. However, persons in this situation need to be admitted as degree candidates before a student DS-2019 form can be issued.
- **Short Term Scholars**: may remain in the U.S. for a maximum of only six months and no extension of stay is permitted.

## Procedures

### Hosting MSU Department:

- Approves International Visitor invitation and J status request per internal MSU department procedures. Please see "*Academic Affairs Guidelines for Visiting Scholars to Minnesota State University, Mankato*" attached with this packet.
- Completes the DS-2019 application form including all attachments.
- Forwards the completed application form to the ISSS for processing.

### Visitor:

- Provides proof of sufficient health insurance that meets J-1 federal requirements or pays for mandatory health insurance. Please see "*Kearney International Center Health Insurance Compliance Form*" attached with this packet.
- Must pay the SEVIS I-901 fee prior to going to the U.S. consulate. For more information on the fee payment please visit: <http://www.ice.gov/sevis/i901/index.htm>.
- Takes the DS-2019, passport, MSU appointment/invitation letter, and any other required financial documents to the U.S. consulate to obtain J-1 visa stamp on passport (exception for Canadian citizens).
- Uses DS-2019 and passport with J-1 visa stamp to enter the U.S.
- Checks in at the ISSS office for mandatory orientation upon arrival.

### **International Scholar and Student Services (ISSS):**

- Processes completed application packet. Processing of complete applications takes about one to two weeks.
- Provide letter to use for visa interview.
- ISSS will send J-1 documents (DS-2019) and invitation letter by air mail only, **however:**
  - **If the department prefers to send the DS-2019 themselves:** they can request to pick up the original DS-2019 and ISSS letter from the office, and mail it from the department at their expense.
  - **If the scholar prefers the documents to be sent to them by express mail:** they can sign up at: <https://study.eshipglobal.com> (at the scholar's expense). The scholar must use the website provided – do not go through the DHL or FedEx website directly, all communication will go through the eshipglobal service, who will notify us that you are requesting your DS-2019 to be sent by express mail. If you use this service, you will be required to create your own user name and password in order to create an account. To request shipment, you will need your Tech ID number (8 digit number provided by MSU).
- Upon visitor's check-in at our office, copies will be made of immigration and other documents to retain SEVIS/immigration records.

**Academic Affairs Guidelines  
For Visiting Scholars to  
Minnesota State University, Mankato**

Visiting scholars for a semester or a year can enhance the academic environment of MSU, especially if arrangements for their visit have been thoughtfully planned. The following guidelines will be used in arranging such visits.

1. Invitations should not be extended without the agreement of the department, the dean, and the academic vice president.
2. The department that extends the invitation must be prepared to host the visitor throughout the visit, that is, to help the visitor to be introduced to the campus and the community. It is expected that the scholar will be engaged with university life throughout the visit and will make at least one public presentation while they are here.
3. Funding arrangements for visiting scholars will vary, depending on whether or not the scholar has his/her own funding. For example, Fulbright scholars have a stipend that requires a match of funds from the university. Others on sabbaticals may not require any university match. Any letter of invitation must clarify both the scholar's and the university's commitments related to funding.
4. If the scholar is to be compensated, all federal and state regulations must be met.
5. A visiting scholar to our campus may have a Mavcard and Tech ID, email access, and library privileges.
6. Departments hosting the visitor should arrange to provide an office, a computer, a phone, and other office supplies.
7. Visitors will be responsible for their own living arrangements and expenses, including parking on campus.
8. Visitors must have their own insurance coverage.

AAC April 2, 2003

# Kearney International Center Health Insurance Compliance Form

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## Minimum Requirements:

Department of State regulations require Exchange Visitor Program sponsors to monitor insurance coverage for all J-1 and J-2 participants under their sponsorship. While no recommendations are made on specific policies or carriers, the regulations do establish minimum coverage as follows per person:

- 1) Medical benefits of at least \$50,000 per accident or illness
- 2) Repatriation of remains in the amount of \$7,500
- 3) Expenses associated with medical evacuation of the exchange visitor to his or her home country in the amount of \$10,000

An insurance policy secured to fulfill these requirements must provide coverage for activities inherent to the exchange program but may impose the following conditions:

- 1) A waiting period for pre-existing conditions as long as the waiting period is reasonable by current industry standards
- 2) A co-payment not greater than 25%
- 3) A deductible not to exceed \$500 per accident or illness

In addition to the standards for coverage, the regulations also set forth rating requirements for acceptable policies. Coverage backed by the full faith and credit of the government of the exchange visitor's home country are exempt from these rating requirements.

**Important:** Department of State regulations require insurance coverage to be in place from the time the exchange visitor enters the program and throughout the duration of the program. Minnesota State University Mankato is required to terminate an exchange visitor's participation in the program if the visitor and/or his or her dependents willfully fail to comply with, and maintain, the required insurance coverage.

*I verify that I have read the information contained above and that I will comply with the insurance regulations as specified by the U.S. Department of State. I understand that it is my responsibility to maintain health insurance coverage for myself and any J-2 dependents for the duration of my J-1 program. I also understand that failure to comply with these requirements will result in my termination from the exchange visitor program.*

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR THOSE WHO REQUIRE PURCHASE OF HEALTH INSURANCE TO MEET J-1 FEDERAL REQUIREMENTS:**

The Health Center on campus can provide options for the visiting scholar that meets the J-1 federal requirements (see reverse side.) The insurance coverage must begin when the visitor enters the U.S. It can be purchased by contacting the Student Insurance Advocate, Kathy Grant at 507-389-6276 ex 244 or [Kathryn.grant@mnsu.edu](mailto:Kathryn.grant@mnsu.edu) .

- 1) If there are no MSU,M benefits, or the MSU benefit does not begin immediately, the health insurance would be \$77 per month which includes medical evacuation and repatriation.
- 2) If you have the MSU, M health benefit, it does not include the necessary medical evacuation and repatriation of remains to the home country provisions. A rider for these requirements can be purchased for \$58 for the policy year ending August 14, 2012.

*I verify that I have read the information contained above and that I will comply with the insurance regulations as specified by the U.S. Department of State. I understand that it is my responsibility to maintain health insurance coverage for myself and any J-2 dependents for the duration of my J-1 program. I also understand that failure to comply with these requirements will result in my termination from the exchange visitor program.*

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Return completed form and copies of insurance documents to:  
Kearney International Center - Minnesota State University Mankato  
CSU 250 - Mankato, MN 56001  
Telephone: 507-389-1281 - Fax: 507-389-2790**

*(We recommend that you keep a copy for your records.)*

# DS-2019 Application Form

(Documentation to be submitted to the ISSS office located in CSU 250)

## Section 1: Information about the Scholar

(Department or scholar may complete. Please print clearly.)

Name: \_\_\_\_\_  
Last/Family Name First Name Middle Name

Gender:  Male  Female      Marital Status:  Single  Married      Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
(mm/dd/yyyy)

City of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Country of Citizenship\*: \_\_\_\_\_ Country of Permanent Residence: \_\_\_\_\_

*\*If scholar has dual citizenship, list country of passport in use for this visit.*

Title/position in home country: \_\_\_\_\_

Institution/employer in home country: \_\_\_\_\_

Has the scholar previously been in the U.S on a J-1 or J-2 status?  YES  NO

If "yes", list dates of program(s) below and attach copies of all previous DS-2019 (formerly IAP-66) forms.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Scholar is presently out of the U.S. The scholar will be applying for the visa at this embassy/consulate:

\_\_\_\_\_.

Scholar is presently in the U.S. and may require a transfer or change of status. *Please consult with ISSS for further procedures.*

Scholar's current mailing address:

\_\_\_\_\_  
\_\_\_\_\_

City/Province: \_\_\_\_\_

Country: \_\_\_\_\_ Zip Code: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

## Section 2: Information about the Appointment

(Must be completed by the hosting department. Please print clearly.)

Eligibility for J-1 Scholar categories:  Professor  Short Term Scholar

Dates of Program: Beginning \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Ending \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
(mm/dd/yyyy) (mm/dd/yyyy)

Academic Staff Title offered: \_\_\_\_\_

Department Collaborator: \_\_\_\_\_  
Please print full name and title

Department Head: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Dean of the College: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Academic Affairs Vice President/Provost: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Section 3: Funding Information (In U.S. dollars)

(Please attach any letter(s), documents and/or official bank statements to validate each funding source below).

**NOTE:** Minnesota State University requires Exchange Visitors have at least \$800 a month for living expenses in Mankato, Minnesota. If at least this amount is not available, the DS-2019 **cannot** be issued.

MSU salary/stipend (if any): \$\_\_\_\_\_ per  month  year  duration of program.

Please list any other financial support provided to the visiting scholar:

U.S. Government (list agency): \_\_\_\_\_ \$\_\_\_\_\_ per \_\_\_\_\_

International Organization: \_\_\_\_\_ \$\_\_\_\_\_ per \_\_\_\_\_

Visitor's home government: \_\_\_\_\_ \$\_\_\_\_\_ per \_\_\_\_\_

Visitor's personal funds: \_\_\_\_\_ \$\_\_\_\_\_ per \_\_\_\_\_

Other (specify): \_\_\_\_\_ \$\_\_\_\_\_ per \_\_\_\_\_

**Total:** \$\_\_\_\_\_ per \_\_\_\_\_

#### Section 4: Information about Scholar's Dependents

- List **ONLY** if dependents are traveling and entering the U.S. with the scholar.
- Dependents are **ONLY** defined as legally wed spouse and minor, unmarried children under the age of 21.
- Include a copy of each dependent's passport identity page.

##### Dependent 1

Name: \_\_\_\_\_  
Last/Family Name First Name Middle Name

Gender:  Male Relationship:  Spouse Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Female  Child (mm/dd/yyyy)

City of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Country of Citizenship\*: \_\_\_\_\_ Country of Permanent Residence: \_\_\_\_\_

*\*If dependent has dual citizenship, list country of passport in use for this visit.*

##### Dependent 2

Name: \_\_\_\_\_  
Last/Family Name First Name Middle Name

Gender:  Male Relationship:  Spouse Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Female  Child (mm/dd/yyyy)

City of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Country of Citizenship\*: \_\_\_\_\_ Country of Permanent Residence: \_\_\_\_\_

*\*If dependent has dual citizenship, list country of passport in use for this visit.*

##### Dependent 3

Name: \_\_\_\_\_  
Last/Family Name First Name Middle Name

Gender:  Male Relationship:  Spouse Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Female  Child (mm/dd/yyyy)

City of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Country of Citizenship\*: \_\_\_\_\_ Country of Permanent Residence: \_\_\_\_\_

*\*If dependent has dual citizenship, list country of passport in use for this visit.*