

## J-1 Exchange Visitor Research Scholar/Professor Extension Request SECTION A

The purpose of this form is to collect details from the department as well as the current Research Scholar or Professor, Exchange Visitor (EV) to process US immigration extension documents. Please **submit only completed packet** to the ISSS for processing, incomplete packets will delay processing. It is also important to consider visa application processing times overseas when determining start dates for the exchange visitor (EV).

Section A: Qualification, Checklist & ISSS Processing

Section B: Completed by Department Section C: Completed by Current EV

#### SECTION A – Qualification, Checklist & ISSS Processing

Current EVs who are in the J-1 Research Scholar or Professor category who will not exceed 5 years or who have applied for the waiver of the 2 Year Home Residency Requirement 212(e). EVs who are in the J-1 Short Term Category who will not exceed 6 months or who have applied for the waiver of the 2 year Home Residency Requirement 212(e).

Checklist of packet to be sent in its entirety to ISSS:

- 1. Section B, page 2 of Extension Request
- 2. Section C, page 3 of Extension Request
- 3. Department Support Letter
- 4. Financial Support Documentation (if not completely funded by sponsoring department)

#### ISSS Processing:

Please submit to ISSS one month prior to expiration date of current EV program.

Once the packet is received in its entirety, ISSS will review for completeness & the DS-2019 document will be requested from the USCIS. Following issuance of the DS-2019 ISSS will contact EV to stop by the ISSS to pick up and sign the new DS-2019.



# J-1 Exchange Visitor Research Scholar/Professor Extension Request SECTION B

### SECTION B – To be Completed by Department

By completed and signing Section B, faculty supervision continuing in the original program objective as stated		be extended for the purpose of
Sponsor (please check one):   Drexel University (D	Drexel University, Co	ollege of Medicine (DUCOM
Administrative Contact:Name	Phone	E-mail
Faculty/Sponsor Contact:Name	Phone	E-mail
Last Name of EV:	First Name of EV:	
Current End Date:/ (mm/dd/yyyy)	Requested New End Date:	/(mm/dd/yyyy)
Signature (Faculty Supervisor):	Date:	/(mm/dd/yyyy)
Signature (Dean):	Date:	/(mm/dd/yyyy)



## J-1 Exchange Visitor Research Scholar/Professor Extension Request SECTION C

#### **SECTION C – To be Completed by Exchange Visitor**

By complete and signing section C, the EV states:

- They have read and understood: <a href="http://exchanges.state.gov/jexchanges/exchange-visitor.html">http://exchanges.state.gov/jexchanges/exchange-visitor.html</a>
- They understand that they can only engage in activities outlined above in Section B and in the department letter

• They understand that they <b>MUST</b> ha	ave continued medi	cal, repatriation and evacu	nation insurance	
Last Name:(As it appears in passport)		First Name:		
Date of Birth:	( <i>mm/dd/yyyy</i> )	E-mail Address:		
Address Line 1:	Address Line 2:(Apt/Floor)			
City:	State/ Province	e: Posta	l Code:	
Financial Support Requirement EVs are required to demonstrate proof of findemonstrated in the sponsorship letters from or foreign government sponsorship letters, homonth amounts:  Scholar: \$1,750.00 Spouse: \$500.00 Child (each: \$325.00	the DU or DUCON	M department / school, <b>ori</b>	ginal bank statements, US	
X			/	
Exchange Visitor's Signature	Print Nam	e	Date (mm/dd/yyyy)	
ISSS USE ONLY				
Approved Denied, Reason for denial				
Assistant Dean/Assistant Director		Date: _	/	