**J-1 Visa Intake Form**

International Scholars Operations

**This form is provided to facilitate collection of information for the** [**J Visa Request Form**](https://lux.ap.washington.edu/visa/j1/new/)**. Academic units must submit a J Visa Request Form to initiate visa sponsorship through ISO. Please** [**contact ISO**](mailto:acadvisa@uw.edu) **with questions.**

***Employee ID (if any):***

**PART I**: To be completed by the international scholar being invited to the University of Washington (UW).

**Section One - Biographic Information**

*Enter names as they appear on the passport*

*Full Name:* Scholar family name/surname, Scholar primary name/given name

(Please refer to the [Machine Readable Zone](http://studyinthestates.dhs.gov/sites/default/files/SEVIS%20Name%20Standards_0.pdf) of your passport. **Do not** use any dashes (“-“), slashes (“/”, “\”), or special characters.)

*Date of Birth:* MM/DD/YYYY *Gender Listed in Passport:*  Female  Male  Other

*City of Birth:*City/town of birth

*Country of Birth:* Choose an item.

*Passport country/Primary country of citizenship:* Choose an item.

*Additional country of citizenship:* Choose an item.

*Additional country of citizenship:* Choose an item.

*Country of legal permanent residence if different than country of citizenship:* Choose an item.

*E-mail address:* username@domain.edu

*Are you currently in the U.S?* YES  NO

*If YES, list U.S. address:* Address line 1

Address line 2

Address line 3

Address line 4

*If YES, list current nonimmigrant status:* Nonimmigrant status

*When did you last arrive in the U.S.?* MM/DD/YYYY

*When will your current status expire?* MM/DD/YYYY

***Have you received, or are you in the process of applying for, a waiver of the 212(e) two-year home residence requirement?\****YES  NO *If YES, provide more detail regarding the home residence waiver application and where you are in the process:* Provide more detail about your waiver application.

**\* Please note that if you receive a positive recommendation from the Department of State on your waiver application, we are no longer able to extend your J-1 status.**

*Select one**of the following if**you have made any prior visits to the U.S.****:***

*For each prior visit to the U.S. (except as a B-1 or B-2 or visa waiver), list your nonimmigrant status and dates of stay:* Enter nonimmigrant status and dates of stay (MM/DD/YYYY - MM/DD/YYYY)

Home Country Position: *Select one position from the* **Home Country Position Description for International Scholars** *list that follows the end of Part I. Type or copy and paste that position into the box below. Your entry MUST be a position description from the list:* Enter your home country position (from the list below)

*Home Country Job Title:* Enter your official title

*Home Country Employer:* Enter the official name

*Are you a graduate of a non-U.S. medical school?* YES  NO

*Highest Degree Earned:* Enter the official degree

*Field of Study:* Enter the official field name

*Name of Granting Institution:* Enter the official name

*Date Received:* MM/DD/YYYY

*Are you enrolled or pursuing a degree at an academic institution outside of the U.S.?* YES  NO

*If YES:*

*Name of institution where you are enrolled or pursuing a degree:* Enter the official name

*What is your current degree level (bachelor’s, master’s, Ph.D., M.D., etc.)?* Enter the official degree

*Anticipated Degree Completion Date:* MM/DD/YYYY

**English Proficiency Requirement**

*Every exchange visitor must possess sufficient proficiency in English to successfully participate in the program and function on a day-to-day basis. Federal law requires sponsors to use and retain evidence of one of the following "objective measurements" to determine the scholar's English language proficiency. See* [*https://ap.washington.edu/ahr/visas/j1/j-1-english-proficiency-requirement/*](https://ap.washington.edu/ahr/visas/j1/j-1-english-proficiency-requirement/) *for more information.*

I can provide the following documentation of my English language proficiency:

A recognized English language test

Signed documentation from an academic institution or English language school

A documented interview conducted by the sponsor either in-person or by videoconferencing, or by telephone if videoconferencing is not a viable option.

**Section Two - Dependents**

* Dependents include your spouse and children under age 21.
* List dependents only if they are coming to the U.S. or are currently in U.S. in J-2 status.
* Do not list dependents who hold U.S. passports or dependents who were born in the U.S.
* Enter names and dates exactly as they appear in passports.
* If you have more than four dependents, list them on a separate page.

**Dependent One:**

*Relationship:*  Spouse  Child

*Full Name:* Family name/surname, Primary name/given name

*Date of Birth:* MM/DD/YYYY *Gender Listed in Passport:*  Female  Male  Other

*City of Birth:* City/town of birth

*Country of Birth:* Choose an item.

*Passport country/Primary country of citizenship:* Choose an item.

*Additional country of citizenship:* Choose an item.

*Additional country of citizenship:* Choose an item.

*Country of legal permanent residence if different than country of citizenship:* Choose an item.

**Dependent Two:**

*Relationship:*  Spouse  Child

*Full Name:* Family name/surname, Primary name/given name

*Date of Birth:* MM/DD/YYYY *Gender Listed in Passport:*  Female  Male  Other

*City of Birth:* City/town of birth

*Country of Birth:* Choose an item.

*Passport country/Primary country of citizenship:* Choose an item.

*Additional country of citizenship:* Choose an item.

*Additional country of citizenship:* Choose an item.

*Country of legal permanent residence if different than country of citizenship:* Choose an item.

**Dependent Three:**

*Relationship:*  Spouse  Child

*Full Name:* Family name/surname, Primary name/given name

*Date of Birth:* MM/DD/YYYY *Gender Listed in Passport:*  Female  Male  Other

*City of Birth:* City/town of birth

*Country of Birth:* Choose an item.

*Passport country/Primary country of citizenship:* Choose an item.

*Additional country of citizenship:* Choose an item.

*Additional country of citizenship:* Choose an item.

*Country of legal permanent residence if different than country of citizenship:* Choose an item.

**Dependent Four:**

*Relationship:*  Spouse  Child

*Full Name:* Family name/surname, Primary name/given name

*Date of Birth:* MM/DD/YYYY *Gender Listed in Passport:*  Female  Male  Other

*City of Birth:* City/town of birth

*Country of Birth:* Choose an item.

*Passport country/Primary country of citizenship:* Choose an item.

*Additional country of citizenship:* Choose an item.

*Additional country of citizenship:* Choose an item.

*Country of legal permanent residence if different than country of citizenship:* Choose an item.

**Dependent Five:**

*Relationship:*  Spouse  Child

*Full Name:* Family name/surname, Primary name/given name

*Date of Birth:* MM/DD/YYYY *Gender Listed in Passport:*  Female  Male  Other

*City of Birth:* City/town of birth

*Country of Birth:* Choose an item.

*Passport country/Primary country of citizenship:* Choose an item.

*Additional country of citizenship:* Choose an item.

*Additional country of citizenship:* Choose an item.

*Country of legal permanent residence if different than country of citizenship:* Choose an item.

**ACADEMIC COMMUNITY**

**Home Country Position Description for International Scholars** (Page 1 of 2)

**University level positions:**

University president or rector

University administrative staff

University teaching staff including researchers

University graduate students

University undergraduate students

University medical students

University students in other professions

University post grad medical trainee

University, other positions

**Secondary School positions:**

Secondary school principal

Secondary school teacher or staff

Secondary school student

Secondary school, other positions

**Elementary school positions:**

Elementary principal, teacher or staff

Elementary school, other positions

**Special schools, institutes or vocational school positions:**

Special school, institute or vocational head

Special school, institute or vocational teacher or staff

Special school, institute or vocational, other positions

**AGRICULTURE (including forestry and fisheries):**

Agricultural entrepreneur

Executive of agriculture business

Agricultural manager

Employee of agricultural enterprise

Professionals or scientists in agriculture

Agriculture, other positions

**ARTS**

Artist (graphic arts)

Author (playwright, poet)

Stage or film actor

Film or stage producer

Composer or musician

Arts, other positions

**COMMUNICATIONS**

**Electronic media positions:**

Head of TV or radio station

Radio or TV journalist

Electronic media technician

Electronic media, other positions

**Printed media positions**:

Editor and/or publisher

Journalist

Technical official in printed media field

Printed media, other positions

**Film as news media positions**:

Film maker

Film as news media, other positions

**GOVERNMENT**

**Central government positions:**

Head of government

Ministerial level official

Executive level official

Civil service employee in central government

Professionals and scientists in central government

Legislator in central government

Judges in central government

Manager of state enterprise

Central government, other positions

**State, regional or provincial government positions:**

Governor or other chief of regional unit

Senior head of regional department

Executive level regional officials

Civil service employee in regional/state government

Professionals and scientists in regional government

Legislator in regional or state government

Judges in regional or state government

Manager of regional enterprise

Regional government, other positions

**City or town government positions:**

Mayor or city manager

Head of city department

Executive level city or town official

Civil service employee in city or town government

Professionals and scientists in city or town government

Legislator in city or town government

Judges in city or town government

Manager of city enterprise

City or town government, other positions

**IMPORTANT POLITICAL FIGURES NOT CLASSIFIED ELSEWHERE**

Opposition leader (not in government)

Opposition leader, legislature

Former influential political official

Important political figure

**INTERNATIONAL ORGANIZATION**

Head of international organization

Senior official of international organization

Employee of international organization

**LABOR**

**Home Country Position Description for International Scholars** (Page 2 of 2)

**Labor union positions:**

Labor union head

Labor union official

Labor union other positions

**Labor union ministry positions:**

Labor minister

Senior ministerial official

Ministry of labor, other positions

**Labor experts in academia positions**:

Labor experts in academia positions

**Labor organization and other labor positions:**

Head of labor organization

Employee of labor organization

**MILITARY**

Military positions

**PRIVATE SECTOR**

**Private business positions:**

Private business entrepreneur

Corporate executive

Manager employed by private business

Employee of private business

Professional or scientist in private business

Private business, other positions

**Self-employed professionals positions:**

Legal field

Medical field

Technical field

Self-employed, other positions

**Independent, non-profit, hospitals or other organization positions:**

Director of institute/corporation or hospital

Manager/executive employed by institute/corporation

Employee of independent institute or corporation

Institute/corporation professional na./scien (?)

Independent, non-profit, hospitals or similar organization, other positions

**RELIGION**

Minister of religion

Religious order/congregation member

Theologian

**SPORTS**

Athlete

Coach

Sports, other positions

**PART II**: To be completed by the UW academic unit that is inviting the international scholar.

**Section Three – Appointment Information**

*UW Appointment Title:*

*Proposed Dates of J-1 Sponsorship: DS-2019 forms are normally issued to match the duration of the appointment; please see* [*https://ap.washington.edu/ahr/visas/admin-resources/j1/eligibility-requirements/*](https://ap.washington.edu/ahr/visas/admin-resources/j1/eligibility-requirements/) *for more information.*

MM/DD/YYYY *to* MM/DD/YYYY

International Scholar’s UW Activities (check as many as applicable):

Research

Observation

Teaching

Consultation with colleagues

Demonstrating special skills

Other. If “Other,” please specify: Enter your response

*List all activity locations, including the UW campus building name and room numbers for on-campus activity locations and street address and zip codes for off-campus activity locations. If there are more than four locations, include a separate attachment.*

1. Activity address
2. Activity address
3. Activity address
4. Activity address

*Will the scholar also perform work from the current US address listed above in Section One\*?* YES  NO

*Field of Specialization at the UW:* Enter the official field name

*International Scholar’s UW Faculty Supervisor:* First and last name

*Title of Faculty Supervisor:*

**Is Exchange Visitor enrolled in or pursuing a degree at an academic institution outside US?** *To sponsor a foreign student for supervised research-based learning at UW, DO NOT submit a visa request to ISO; instead, contact* [*UW* *International and English Language Programs*](https://www.ielp.uw.edu/programs/research-programs/)*.*

**What plans are in place for the scholar and the scholar’s dependents to participate in American cultural activities? Please see our**[**J-1 Cultural Exchange Requirement**](https://ap.washington.edu/ahr/visas/admin-resources/j1/eligibility-requirements/j1-cultural-exchange-requirement/)**page.**

Enter your response

**Section Four - Funding Information**

*See* [*http://ap.washington.edu/ahr/visas/j1/funding/*](http://ap.washington.edu/ahr/visas/j1/funding/) *for information on funding requirements for J-1 exchange visitors. OAP recommends obtaining documentation of all funding before submitting the visa request; you must provide documentation of funding with the complete visa request packet after conditional approval by OAP.*

*UW Appointment Service Period:*  9-month 12-month

This refers to the school/college/campus and position service period, not the sponsorship period.

*UW Per-Month Salary: Include only salary paid through UW payroll for the proposed dates of sponsorship. Monthly full-time salary does not include pay through PDR, clinical or practice plan revenue, or incentive payments. DO NOT round off amount*: $XX,XXX.XX

*Total UW salary for the requested sponsorship period: $*XX,XXX.XX

*UW non-salary compensation for the full sponsorship period: $*XX,XXX.XX

*UW non-salary compensation type*: Enter your response

*Non-UW funding amount for the full sponsorship period: $*XX,XXX.XX

Converted to US $ if in foreign currency

*Non-UW funding sources:* Enter your response

*Personal funds for the full sponsorship period: $*XX,XXX.XX

Converted to US $ if in foreign currency

*Grants/contracts funding the position, if any:*

Enter your response

List any grants/contracts (eGC1 numbers) funding the position or any sponsored projects (eGC1) in which the individual will participate.

**Section Five - Sponsoring Department/Program Information**

*UW Home Department:* Enter the official name

*UW Home School/College/Campus:* Enter the official name

*UW Unit Contact Details (for further information regarding this visa request):*

*Contact Name:* Enter the official name

*Contact’s Email:* UW NetID@uw.edu

*Secondary Contact Name:* Enter the official name

*Secondary Contact Email:* UW NetID@uw.edu

*Tertiary Contact Name:* Enter the official name

*Tertiary Contact Email:* UW NetID@uw.edu

*NetIDs who should be able to view this request:*

Enter your response

List any other NetIDs for other people in your unit who should be able to access this visa request and associated files.

DO NOT list the scholar’s NetID.

*Campus Box:* 35XXXX

*Campus Phone:* 5-5555

*Department Chair/Program Director Name:* First and last name

*Dean’s/Chancellor’s Name:* First and last name

*Dean’s/Chancellor’s Office Contact’s Name:* First and last name

*Dean’s/Chancellor’s Office Contact’s Email:* UW NetID@uw.edu

**Section Six - UW Financial Information**

* *Visa fees cannot be charged to federal grants; please ensure the budget information you specify is valid. Please follow this*[*general guide*](https://finance.uw.edu/fr/references/budget-number-prefix)*to ensure you are using the appropriate budget information.*
* *Please enter a Grant, Gift, Project, Program, or Cost Center + Resource worktag.*
* *The visa request form will contain lists of active worktags that are updated daily*
* *The "Company" field is required, but will be populated by the visa request form if it can be derived from the worktag.*

*Grant:* Enter grant name

*Gift:* Enter gift name

*Project:* Enter project name

*Program:* Enter program name

*Cost Center:* Enter cost center name

*Resource:* Enter resource name

*Company:* Enter company name

*Budget Contact Name:* First and last name

*Budget Contact’s Email:* UW NetID@uw.edu

**Additional Information**

Use this space to add comments or information: Enter your response