



REQUEST FORM FOR CERTIFICATE OF ELIGIBILITY (DS-2019) FOR J-1 VISA STATUS

Type or print clearly. See page 3 for eligibility requirements. Read DS-2019 Instructions Form and complete all items. Obtain the signature of the UCLA Department Chair and faculty advisor. Department must return the request form together with all supplemental documents to DCISS by email or campus mail - "Attn: J-1 Advisor." Processing time is 10 working days. The department will be notified when the DS-2019 is completed and ready for pick up. Departments are responsible for sending the DS-2019 to prospective visitor.

Section A: Purpose of the DS-2019

- Begin New Program, or change visa to J-1, accompanied by ___ family member(s).
Transfer of J-1 visa to UCLA from another U.S. Institution (attach copy of last DS-2019).
Extension of stay to continue an ongoing program.

Section B: Exchange Visitor (EV) Biographical Information

Family/Last Names: First Name: (as appears on passport)
Gender: Male Female Date of Birth: (mm/dd/yyyy) Married: Yes No
City of Birth: Country of Birth:
Country of Citizenship: Country of Permanent Residence:
Email: Primary Phone Number:

Permanent Address Outside U.S.

Street Address: Room #: City:
State/Province: Postal Code: Country:

U.S. Address (Use UCLA Department Address for "Begin New Program" requests)

Street Address: Room #: City:
State/Province: Postal Code: Country:

Section C: Program Information

Appointment Date: (mm/dd/yyyy) From: To:

UCLA Department Name:

Primary Activity while at UCLA (J-1 Visa Category)

- Professor teach, lecture, observe, or consult on a non-tenure position; MA/ MS required - check eligibility on page 3
Research Scholar research, observe, or consult; MA/MS required - check eligibility on page 3
Short-term Scholar lecture, observe, consult, train or demonstrate special skills for no more than 6 months; MA/MS required
Specialist an expert to observe, consult, or demonstrate special skills for no more than 1 year
Non-degree Student engaged full-time in a professional or certificate program or a non-degree objective course of study

Subject of Activity (brief description of program activities at UCLA -- No more than 15 words):

FOR DCISS USE ONLY: Signed ___ PP ___ \$\$ ___ CV ___ Memo ___ P-39 ___ Eng ___
VGR ___ URC ___ DGR ___ Revised 1/23/2018

UCLA Appointment Title:

Other:

Attach Appointment Approval Confirmation notice from corresponding departments (Academic Personnel Office, Graduate Division, Undergraduate Research Center, employment offer letter, or admissions letter for certificate program).

Is this a tenure track position? Yes No

Medical Insurance: Which insurance plan will the exchange visitor be enrolling in?

VSBP (enroll/waive)

Postdoctoral PSBP Plan

UCSHIP

UCLA Medical Benefits for Employees

J-1 visitors at UCLA are required to enroll OR opt out of the [Visiting Scholar Injury and Sickness Insurance Plan \(VSBP\)](#) through Garnett-Powers & Associates, unless visitor is eligible to enroll in any of the other 3 UCLA affiliated plans designated above.

UCLA Funds: Is the exchange visitor’s program activity supported by 19900/20000 funds? Yes No

An additional \$300 co-payment is required for visitations and program activities not fully supported by 19900/20000 funds. The \$300 co-payment may also be required for other types of programs. See FEES section at the DCISS website for more information.

Special Programs: Is the department receiving remuneration from the visitor or visitor’s home institution/third party to participate in program activity?

Yes No

J-1 Requests for visitors participating in structured programs that involve remuneration for the department must be evaluated to determine that such program meets UCLA Policy. Consultation with University entities and additional supporting documentation may be required before the DS-2019 can be released.

Section D: Occupation and Education

What is the EV’s current or last activity in their home country (country of citizenship/permanent residence)?

Student

Researcher

Professor

Other Employment:

If currently enrolled as a student, please specify the level, name of institution, and **expected date of degree**:

If employed, specify title and name of employer:

Highest Academic Degree earned (Equivalent to U.S. Degrees: BA, MA, Ph.D., etc.):

Date Awarded: (MM,YYYY):

Section E: Previous J Visa History and Current Visa Information

During the last two years, has the exchange visitor been issued any J-1 and/or J-2 Status in the U.S.? Yes No

(If “yes,” copies of previous DS-2019s are required)

Is EV currently in the U.S.? Yes No If yes, under which visa type?

Section F: Financial Support Information for the entire period covered by this form. Specify amounts in US dollars

Funding Source:	Monthly Amount:	Total Amount:
UCLA Department budget, grant, etc. (Salary)		
Exchange Visitor’s Government (attach financial document) Name of the agency:		
Other organizations/institutions in the U.S. or abroad (attach financial document) Name(s):		
Personal funds (attach copy of bank statement in English)		

Section G: Dependent Information – list accompanying dependents who do not hold U.S. passports; copy of dependent passport required

1. Last, First Name (as appears on passport): Relationship (Spouse/Child): Date of Birth (MM,DD,YYYY):

City of Birth: Country of Birth: Country of Citizenship: Country of Permanent Residence:

Email: Phone Number:

2. Last, First Name (as appears on passport): Relationship (Spouse/Child): Date of Birth (MM,DD,YYYY):

City of Birth: Country of Birth: Country of Citizenship: Country of Permanent Residence:

Email: Phone Number:

3. Last, First Name (as appears on passport): Relationship (Spouse/Child): Date of Birth (MM,DD,YYYY):

City of Birth: Country of Birth: Country of Citizenship: Country of Permanent Residence:

Email: Phone Number:

Section H: UCLA FACULTY MEMBER under whose direction the Exchange Visitor’s primary activity will be carried out. The department has verified the educational credentials, English proficiency, and source(s) and amount of funding available.

Name: Title: Email:

Signature: Date:

Section I: CERTIFICATION and APPROVAL by DEPARTMENT CONTACT

I hereby certify that the information provided on this form is true and correct to the best of my knowledge. (This person will serve as the primary department contact for DCISS and will be notified when the DS-2019 form is prepared for pick up)

Name: Email: Phone:

Signature: Date:

Section J: UCLA DEPARTMENT CHAIR’S APPROVAL

This certifies that the person named above is eligible, qualified and accepted to carry out, during the period specified in item C, the activity(ies) indicated. The department has verified the educational credentials, English proficiency, and source(s) and amount of funding available.

Name: Signature: Date:

Visitor is not eligible for J STATUS under the following circumstances:

1. If he/she had completed a previous J program (e.g. Specialist or Student) which lasted more than 6 months and now requesting a J status as a **RESEARCH SCHOLAR** or **PROFESSOR** to start a **NEW PROGRAM**, there must be a 12-month gap between the end date of the previous J1/J2 program and starting date of the new J program.
2. If he/she had completed a **previous J program** in the U.S as a **A PROFESSOR** or **RESEARCH SCHOLAR**, he/she is subject to **24-MONTH BAR (gap) TO START A NEW J PROGRAM** as a **A PROFESSOR** or **RESEARCH SCHOLAR**.
3. If he/she had applied for an “H” class **VISA** or U.S. **PERMANENT RESIDENT STATUS** (green card).
4. If he/she had **applied for a Waiver of the Two Year Home Residence Rule** and **RECEIVED APPROVAL** notification from the State Department or the U.S. Citizenship and Immigration Service (USCIS).
5. If the **STUDENT/NON-DEGREE STUDENT** is fully supported by **PERSONAL FUNDS & FAMILY FUNDS**.
6. If the position is **TENURE TRACK**.



CERTIFICATION OF ENGLISH LANGUAGE PROFICIENCY

The Department of State requires J-1 Exchange Visitors to have "sufficient proficiency in the English language, as determined by an objective measurement of English language proficiency, to successfully participate in his or her program and to function on a day-to-day basis." [22 CFR 62.11(a)(2)] An applicant whose first language is English and is a citizen of a country in which English is the primary spoken language of daily life (e.g., Australia, Barbados, Canada, Ireland, Jamaica, New Zealand, United Kingdom) is exempt from this requirement. Attach this form with the appropriate supporting documentation. This form is required for all "Begin New Program" and "Transfer In" requests.

Exchange Visitor's Name: _____ Date: _____

Indicate how the Department has certified English proficiency for the prospective exchange visitor. Options 2, 3, 4, & 5 are not available to UCLA admitted degree students, admitted NDOs, & Exchange Students (e.g. EAP).

1. Certification by a language test recognized by UCLA Admissions https://grad.ucla.edu/gasaa/admissions/ENGREQ.HTM

- A copy of the test score is provided (IELTS & TOEFL only)
- The test must have been taken within the past 2 years
- IELTS overall band score of 7 or higher
- TOEFL test score must be 560 (paper based) or 87 (internet based iBT)

2. Certification by home academic institution where English is used.

- A copy of the letter with signature from school official is attached.
- Verifies the exchange visitor possesses English language proficiency high enough to function daily within the UCLA position and within the local U.S. community.
- Explains use of English at home academic institution.
- Issued on academic institution letterhead in English within the past 6-months.

3. Certification by English language school where English training was completed within the past 2 years.

4. Copy of signed diploma or signed transcript from U.S. universities or universities in countries where English is the native language.

5. Certification by the Sponsoring Professor

PI Name: _____

Date of Interview: _____

Duration of Interview: _____ mins

The Interview Was Conducted: In person By Videoconference By Phone

Interview Notes (required):

I declare under penalty of perjury that I have interviewed the prospective exchange visitor, and I have verified that the scholar's English language proficiency is sufficient to function daily within their UCLA position and within the local U.S. community.

PI Signature (required)

Date