

Application Checklist/Required Documentation

- Proof of funding (in English) for the extension period (see page 2)
- Proof of health insurance for the extension period for J-1 scholar and any J-2 dependents

Extension Application

Visiting Scholar Section (to be filled out by visiting scholar)

Name (as it appears on passport):	
SIUE Department:	Name of SIUE Host:
Current DS-2019 end date:	New Requested DS-2019 end date:
Have you applied for a change of immigration status, or for U.S. permanent residency? If yes, please explain.	
Have you applied for or received a waiver of the 212(e) Two-year Home Residence requirement? If yes, please explain.	
If you have J-2 dependents, will they be staying in the U.S. for the extension period? If no, when will they return to their home country? *Note: if you are not accompanied by any J-2 dependents, you may leave this question blank.	

I declare that I am the individual named above and that the information listed on this form is complete and accurate to my knowledge.

Visiting Scholar's Signature

Date

Proof of Funding Documentation

Proof of funding which meets the following requirements is needed to extend a visiting scholar program:

- \$1,800 per month for the visiting scholar (\$21,600 per year)
- \$417 per month for the J-2 spouse (\$5,000 per year)
- \$333 per month for each J-2 child (\$4,000 per year)

The proof of funding could include any of the following:

- Offer letter from SIUE indicating a salary or stipend
- Scholarship or sponsor letter signed and on the organization's letterhead
- Personal bank statement—if statement does not have scholar's name on it, it must be accompanied by a sponsor letter stating that the money will be used for the scholar's stay.

Host Department Section *(to be filled out by faculty host)*

Answer the following questions which help to determine the scholar's eligibility for an extension of stay:

Why is an extended stay necessary?

Will the visiting scholar continue to pursue the same activities and objectives for which they were initially invited to SIUE? If no, please explain.

As the department sponsor of this prospective exchange visitor, we understand and continue to accept the hosting responsibilities with respect to the above named J-1 exchange visitor and any J-2 dependents. We acknowledge that failure to comply with the Department of State regulations may result in the termination of the exchange visitor's program in order to maintain the integrity of and SIUE's ability to continue to participate in the Department of State Exchange Visitor Program.

SIUE Host Faculty Member

Signature

Printed Name

Date

Department Chairperson/Dean

Signature

Printed Name

Date