

Please complete the following information about yourself. You must submit the following items to the University of Michigan department hosting your J-1 program (do not send directly to the International Center):

1. This information form (pages 1 and 2) completed and signed.
2. A copy of the passport picture page, including expiration date, for the J-1 Exchange Visitor and J-2 dependents *(if any)*.
3. Financial documentation of all non-University of Michigan funding sources.
4. *If you have held J-1 or J-2 status in the past two years:* Legible copies of all DS-2019, J-visa and most recent I-94.
5. *If you are currently in the U.S.:* Copies of your current immigration documents (most recent I-94, visa, entry stamped I-20 or DS-2019 form, and EAD if applicable).
6. A copy of your current CV or Resume.
7. *If your country of Permanent Residence differs from your country of citizenship,* provide legal documentation that you have been authorized to permanently immigrate into that country.

BIOGRAPHICAL INFORMATION <i>(must match the copy of passport provided)</i>	
<b>Last Name:</b>	<b>First Name:</b>
<b>Middle Name</b> <i>(if any):</i>	
<b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Date of Birth</b> <i>(mm/dd/yyyy):</i>
<b>City of Birth:</b>	<b>Country of Citizenship:</b>
<b>Country of Birth:</b>	<b>Country of Legal Permanent Residence:</b>
<b>Permanent Address</b> <i>(in country of Permanent Residence include postal code):</i>	<b>Phone Number:</b>
	<b>E-mail Address:</b>
	<b>U.S. Social Security ID #</b> <i>(if any):</i>
	<b>University of Michigan ID #</b> <i>(if any):</i>
<b>Mail DS-2019 To Address</b> <i>(include postal code):</i>	<b>Position or Occupation</b> <i>(in country of Permanent Residence; please indicate level in school if student):</i>
	<b>Institution/Organization</b> <i>(where position/occupation was held):</i>
<b>Major Subject/Field:</b>	<b>Specialty within field:</b>
<b>Do you have a medical doctor degree?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>Are you a medical doctor who will apply for a MI Medical License?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO

U.S. IMMIGRATION INFORMATION
<b>Have you ever been in a J-1 program before at the University of Michigan?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO
<b>Have you held a J-1 or J-2 status at any institution in the past two years preceding this requested program?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO
<b>How will you obtain J-1 status?</b>
<input type="checkbox"/> I will apply for a J-1 visa at a U.S. consulate/embassy abroad.
<input type="checkbox"/> I am in the U.S. in another status and will request to change my status to J-1 within the U.S. <i>(process takes 3-5 months)</i>
<b>My current status is:</b>
<input type="checkbox"/> I am currently in J-1 status and will transfer my J-1 program to the University of Michigan <i>(include a copy of your current DS-2019).</i>
<b>Have you applied for or received a 212 (e) [two-year home residency requirement] waiver from the U.S. Department of State?</b> <input type="checkbox"/> Yes, applied <input type="checkbox"/> Yes, approved <input type="checkbox"/> No <input type="checkbox"/> Not Applicable



EMPLOYMENT AND ADDITIONAL VISITS

Will you be visiting or employed by other U.S. universities before, during, or after your stay at University of Michigan?

☐ YES ☐ NO

If yes, what are your plans?

J-2 DEPENDENT INFORMATION

Exchange visitor's spouse and children under the age of 21 (non-U.S. citizen) are eligible to obtain J-2 dependent status. Include copies of the passport photo/biographical page and expiration date for each J-2 dependent. Please add additional page if there are more than 4 dependents.

Will your spouse or children accompany you to the U.S.? ☐ YES ☐ NO

	Dependent 1	Dependent 2	Dependent 3	Dependent 4
<b>Relationship to J-1</b> <i>(i.e. spouse, child)</i>				
<b>First Name</b>				
<b>Middle Name</b>				
<b>Last Name</b>				
<b>Date of Birth</b>				
<b>City of Birth</b>				
<b>Country of Birth</b>				
<b>Country of Permanent Residence</b>				
<b>University of Michigan ID Number</b> <i>(if any)</i>				
<b>E-mail Address</b> <i>(if any)</i>				

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FUNDING INFORMATION

Please specify all outside funding sources you will receive during your J-1 program. If you will be fully funded by the University of Michigan you do not need to complete this section. Please note the minimum requirements below **(through August 31, 2020)**.

Exchange Visitor (no dependents)	\$2,500 per month (\$30,000 per year)
Exchange Visitor + 1 Dependent	\$3,350 per month (\$40,200 per year)
Exchange Visitor + 2 Dependents	\$3,775 per month (\$45,300 per year)
Exchange Visitor + 3 Dependents	\$4,175 per month (\$50,100 per year)
Exchange Visitor + 4 Dependents	\$4,475 per month (\$53,700 per year)

For each additional dependent, add an additional \$400 per month (\$4,800 per year)

Name of Organization	Funding Amount
	\$
	\$

Copies of financial documentation for all non-University of Michigan funding sources are required. Examples are a personal bank statement or an award letter. Please see the attached Financial Resources Statement for additional information about the cost of living and health insurance.

- ☐ I understand I am required to attend a mandatory check-in program at the University of Michigan International Center.
- ☐ I understand I am required to maintain health insurance that meets the requirements of the U.S. Exchange Visitor Program and the University of Michigan.
- ☐ I am aware of the 12 and 24 Month Bars on Repeat Participation, including how they apply to J-2 dependents:  
<http://internationalcenter.umich.edu/scholars/j1-scholars/12-and-24-bars>
- ☐ I am aware of the 212(e) Two-Year Home Residency Requirement, including how it applies to J-2 dependents:  
<http://internationalcenter.umich.edu/j-two-year-requirement>
- ☐ I certify, to the best of my knowledge, all of the information I have supplied is accurate.

Signature

Date

**FINANCIAL RESOURCES STATEMENT FOR THE ISSUANCE OF FORM DS-2019**

*Please keep pages 3 and 4 for your own records, do not submit them.*

**PLEASE READ THIS INFORMATION CAREFULLY. FAILURE TO FOLLOW INSTRUCTIONS WILL RESULT IN A DELAY IN PROCESSING YOUR IMMIGRATION DOCUMENT.**

In order to generate a Form DS-2019, the University of Michigan is required by the U.S. government to obtain documentation proving you have adequate financial resources to provide for your expenses and the expenses of your dependents for the duration of your program. Therefore, you are required to certify the availability of sufficient funds in the form of bank statements and/or proof of support from a sponsor.

**REQUIREMENTS FOR THE DOCUMENTATION OF FUNDS**

- A provided bank statement must be official and dated
- All accounts must be easily accessible and liquid asset.
- All documents must be in English (an official English translation must accompany the original if not)
- All supporting documentation must be dated within one year
- Letters of sponsorship must include exact dollar amount of support (in US dollars), dates of sponsorship, and be on official letterhead

**ACCEPTABLE MEANS OF SUPPORT TO MEET THE FUNDING REQUIREMENTS**

**Exchange Visitor's Personal Funds**

- Bank statement in your name, meeting the requirements above

**Family or Other Individual Sponsor Funds**

- Official, dated bank statement meeting the requirements above
- Each individual providing support must also submit an affidavit/letter indicating the exact U.S. dollar amount provided

**Financial Support from Government/Organization/Employer**

- A detailed letter from the sponsor meeting the requirements above

**NOTE: The following documents are NOT acceptable:**

- Payroll statements
- Statements verifying future earnings
- Insurance premiums and policies
- Property or personal assets (automobiles, land, buildings, jewelry, etc.)
- Non-liquid assets such as stocks, bonds, equities, retirement accounts
- Income tax returns
- Lines of credit

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## COST OF LIVING (based on rates from September 1, 2019 to August 31, 2020)

The following funding requirements were developed using U.S. Government data on the cost of living in Ann Arbor in order to ensure that our exchange visitors will have the ability to support themselves with at least the basic necessities. The funding requirements can be met using the J-1 Exchange Visitor's personal funds, funds from the J-1 Exchange Visitor's host department, or funds from another source such as scholarship/fellowship-granting organization from the Exchange Visitor's home country.

<b>Exchange Visitor</b> (no dependents)	\$2,500 per month (\$30,000 per year)
<b>Exchange Visitor + 1 Dependent</b>	\$3,350 per month (\$40,200 per year)
<b>Exchange Visitor + 2 Dependents</b>	\$3,775 per month (\$45,300 per year)
<b>Exchange Visitor + 3 Dependents</b>	\$4,175 per month (\$50,100 per year)
<b>Exchange Visitor + 4 Dependents</b>	\$4,475 per month (\$53,700 per year)

**For each additional dependent, add an additional \$400 per month (\$4,800 per year)**

## INSURANCE

J-1 Exchange Visitors are required to have health insurance that meets U-M requirements for themselves and any accompanying J-2 dependents during the entire time they are J-1 exchange visitors at the University of Michigan. Health Insurance costs are as follows:

<b>Exchange Visitor</b> (no dependents)	\$142.39 per month (\$1720.68 per year)
<b>Exchange Visitor + 1 Dependent</b>	\$279.27 per month (\$3351.24 per year)
<b>Exchange Visitor + 2 or more Dependents</b>	\$416.32 per month (\$4995.84 per year)

Some J-1 exchange visitors who are employees of the University of Michigan may pay less based on employer contributions to the health insurance plan.

For more information on the health insurance requirement, please visit:

<http://www.internationalcenter.umich.edu/resources/healthins/requirement-and-enrollment-process>

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## EXAMPLE OF AVAILABLE FINANCES AFTER INSURANCE COSTS HAVE BEEN PAID\*

\*Rates assume that an Exchange Visitor's DS-2019 program start date is the first day of a calendar month and end date is the last day of a calendar month, i.e. start date 09/01/2019 and end date 09/30/2020.

<b>Exchange Visitor</b> (no dependents)	\$2,500 per month (\$30,000 per year)
Insurance Cost	-\$143.39 per month (\$1,720.68 per year)
Amount Left for Living Expenses	<b>\$2,356.61 per month (\$28,279.32 per year)</b>
<b>Exchange Visitor + 1 Dependent</b>	\$3,350 per month (\$40,200 per year)
Insurance Cost	-\$279.27 per month (\$3,351.24 per year)
Amount Left for Living Expenses	<b>\$3,320.73 per month (\$39,848.76 per year)</b>
<b>Exchange Visitor + 2 Dependents</b>	\$3,775 per month (\$45,300 per year)
Insurance Cost	-\$416.32 per month (\$4,995.84 per year)
Amount Left for Living Expenses	<b>\$3,358.68 per month (\$40,304.16 per year)</b>
<b>Exchange Visitor + 3 Dependents</b>	\$4,175 per month (\$50,100 per year)
Insurance Cost	-\$416.32 per month (\$4,995.84 per year)
Amount Left for Living Expenses	<b>\$3,758.68 per month (\$45,104.16 per year)</b>
<b>Exchange Visitor + 4 Dependents</b>	\$4,475 per month (\$53,700 per year)
Insurance Cost	-\$416.32 per month (\$4,995.84 per year)
Amount Left for Living Expenses	<b>\$4,058.68 per month (\$48,704.16 per year)</b>