

# J-1 Research Scholar and Exchange Visitor Application Form

Family Name:		Given Name:		Middle Name:
Mailing Address:			Email address:	
Date of Birth <i>(Month/Day/Year)</i> Male      Female		Country of Birth:		City of Birth:
Citizen of: <input type="radio"/> <input type="radio"/>		Legal permanent resident of:		
Position in that country prior to coming to US:		CSUF Fresno sponsoring Department: (Include Mailing Address)		
Have you previously held a J-1 visa? <input type="radio"/> yes <input type="radio"/> no If yes Dates: / / to / /		If yes, School where The J- 1 visa was issued:		
CSUF Arrival Date <i>(Month/Date/Year):</i>		CSUF Departure Date <i>(Month/Date/Year):</i>		
Person hosting exchange visitor must provide cultural orientation to the US, transportation, arrange housing, etc. Name: _____ ext: _____		Rate English language Competence: 10 ----- 5 ----- 1 Excellent                  Good                  Poor <b>Attach Documentation</b>		
You will purchase Insurance from : <input type="radio"/> On Campus <input type="radio"/> Other		If other health insurance Please indicate policy name:		

This J-1 Visitor is (for more detailed differences, please refer to <https://cge.fresnostate.edu/international/research-scholar-ev>):

- Professor. Meets requirements as a faculty member that the institution would hire, primarily involved in teaching or lecturing.
- Research Scholar. Meets requirements as a faculty member that the institution would hire, involved primarily in conducting research.
- Specialist. Expert in a field of specialized knowledge or skill to engage in observation, consultation or demonstration of special skill, limited to less than one year, may be non-academic.
- Short-term Scholar. Professor, research scholar or specialist or a person with similar education or accomplishments coming to the U.S. for a short-term visit – a few days to less than 6 months.
- Intern/Trainee. A currently enrolled student or graduated student visiting Fresno State to reinforce academic study; to seek work-based learning experience and on-the-job exposure to American techniques, methodologies, and technologies; and to enhance the knowledge of American culture and society.  
**Submission of Form DS-7002 and J-1 Intern/Trainee Acknowledgement Form are required before J-1 Intern/Trainee DS-2019 is issued**

Specific field of exchange visitor: \_\_\_\_\_

Described the expected activities for exchange visitor: \_\_\_\_\_

Privileges provided to the exchange visitor: (check all that apply)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Library                | <input type="checkbox"/> Office          | <input type="checkbox"/> Approval to work, receive payment |
| <input type="checkbox"/> Adjunct faculty status | <input type="checkbox"/> Telephone       | <input type="checkbox"/> Audit or sit-in on classes        |
| <input type="checkbox"/> Computer use           | <input type="checkbox"/> Parking         | <input type="checkbox"/> Other, please detail: _____       |
| <input type="checkbox"/> Email account          | <input type="checkbox"/> Up front monies | _____  |

Financial Support:

- California State University, Fresno. \$ \_\_\_\_\_  
Students: Provide tuition waiver, scholarship or assistance verification
- U.S. government agency. Agency: \_\_\_\_\_ \$ \_\_\_\_\_
- International Organization. Name: \_\_\_\_\_ \$ \_\_\_\_\_
- Exchange visitor's government (attach proof and amount of support) \$ \_\_\_\_\_
- Bi-national Commission. List: \_\_\_\_\_ \$ \_\_\_\_\_
- Other organizations. List: \_\_\_\_\_ \$ \_\_\_\_\_
- Personal Funds \$ \_\_\_\_\_

Dependent (Spouse or Child/Children) accompanying the exchange visitor:

Spouse	Family Name	Given Name	Relationship: <input type="radio"/> Male <input type="radio"/> Female
	Date of Birth (Month/Date/Year):	Country Of Birth	City of birth
	Citizen of:		Legal permanent resident of:
Child	Family Name	Given Name	Relationship: <input type="radio"/> Male <input type="radio"/> Female
	Date of Birth (Month/Date/Year):	Country Of Birth	City of birth
	Citizen of:		Legal permanent resident of:
Child	Family Name	Given Name	Relationship: <input type="radio"/> Male <input type="radio"/> Female
	Date of Birth (Month/Date/Year):	Country Of Birth	City of birth
	Citizen of:		Legal permanent resident of:
Child	Family Name	Given Name	Relationship: Male Female <input type="radio"/> <input type="radio"/>
	Date of Birth (Month/Date/Year):	Country Of Birth	City of birth
	Citizen of:		Legal permanent resident of:

Fresno State Use Only -- Approvals:

Mentor/Host	Print Name:	Department:	
	Signature:	Date:	Email:
Department Chair:	Print Name:	Department:	
	Signature:	Date:	Email:
Dean:	Print Name:	Department:	
	Signature:	Date:	Email:
Office of Faculty Affairs (Library Room 4142 Mail Stop ML55)	Print Name:	Department:	
	Signature:	Date:	Email: