

 Mail to: Division of International Affairs: The Center for Global Studies & International Education Morgan State University, 1700 E. Cold Spring Lane, Baltimore, MD 21251 Montebello Complex D-210
 Website: http://www.morgan.edu/administration/international\_affairs.html
 For questions, refer to: The Center for Global Studies & International Education Johnson Niba, Director for Study Abroad & Scholar Exchange
 Phone: 443-885-4029 Fax 443-885-8364

# Request to Invite an Exchange Visitor

J-1 Temporary, Non-Immigrant Visa for Academic Exchanges

# Summary of Steps:

- (1) Please **first call the Center for Global Studies & International Education (CGSIE)** to let us know about your prospective exchange activity. At that time, we can be sure that the J-1 visa is feasible for your prospective visitor or discuss other options.
- (2) Complete this entire form, obtain needed signatures of approval, attach all required documentation, and submit to CGSIE. (Many sections of this form require information from your visitor, **but the form should be completed by the MSU faculty member** who will coordinate the exchange, NOT by the prospective visitor.)
- (3) The CGS will request final approval from the Provost, issue the letter of invitation, create a record in the Department of Homeland Security's information system, download and print the J-1 visa application certificate (Form DS-2019), and prepare the visa/invitation packet. CGS turn-around time is 3-10 days, depending on the time of year.
- (4) Housing arrangements, Bear Cards and E-mail account acquisitions, are the responsibility of the (HOST) sponsoring department.

**Section One:** Please provide the name of the initiator / host of this proposed exchange.

Name:	
Title:	Department:
Preferred Email Address:	Preferred Phone #:



#### Section Two: Timeline

As it varies per citizenship, please ask visitor to research J-1 visa application processing times: advance time for obtaining visa interview appointment, turn-around time for visa stamp in the passport, and any additional time for background/security clearance at the specific U.S. Consulate nearest his/her residence: <a href="https://www.travel.state.gov/travel/tips/embassies">www.travel.state.gov/travel/tips/embassies</a>. All J-1 visa applicants must first pay the SEVIS fee (Form I-901): <a href="https://www.fmjfee.com/index.jhtml">https://www.fmjfee.com/index.jhtml</a>, which can be done after the DS-2019 record number is available.

#### Timing --

Please indicate the time of this visit. Beginning Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

(Allow sufficient time prior to arrival for international mailing, visa application, travel arrangements, and settling in.)

Desired length of stay, as per provisions for funding (should the above exact dates not work out): \_\_\_\_\_\_

Does visitor need a formal letter of invitation in order to obtain financial backing and/or leave of absence?  $\Box$  YES  $\Box$  NO If yes, please ask and fill in the deadline date for the official letter of invitation: \_\_\_\_\_\_.

# Section Three: Prospective Visitor's Bio-Demographic Information

Important! ALL of this information is needed to prepare the visa application certificate. Also, **ATTACHMENT NEEDED:** obtain photocopy of passport bio-demo page (scan or fax is fine) for visitor and any accompanying family members, and submit with completed form.

Given Name(s)		Family Name		
Gender: □ Female □ Male Citizenship/Passport Country:		Date of Birth:	Month/Da	y/Year
Country of Current Legal Residence	, if different: _			
Country, State, and City of Birth: _	Country	Province/S	State	City



**Family Member Information, IF they will join** visitor with J-2 dependent visa in the United States. Please provide information requested above for each: Given Name(s), Family Name. Gender. Birth-date (mo/da/yr format). Citizenship. Legal Residence. Country, Province, and City of Birth. Plus: **spouse and/or child**.

Additional family members, continued on reverse side?: 
□ Yes 
□ No

# Section Four: Prospective Visitor's Credentials and Employment Information

 ATTACHMENTS: Photocopy of visitor's diploma from highest degree earned, and copy of CV.

 Name of Employer:
 Position/Title:

 Academic Field:
 Highest degree earned:

 College/university and country where degree was earned:

# Section Five: Proposed Exchange Activities

List and briefly explain the specific scholarly activities, duties, relationships, and responsibilities while at Morgan State University. If none of these involve payment by Morgan State University, and the visitor is not employed by one of our partner institutions abroad (official MOU signed by each president), then you must also carefully describe how the visit/visitor will directly, concretely benefit MSU students, faculty, and community. If a direct benefit to the university cannot be clearly established, then the use of our J-1 visa will not be possible without an employment or exchange partner relationship.

Page **3** of **7** 



**ATTACHMENT**: If there will be an employment arrangement, please also submit a letter from the employing department/supervisor describing the duties, length of employment, and salary.

# Tentative Selection of Exchange Visitor Category (to be finalized by CGS):

□ **Professor:** More than 50% of visitor's time must be spent teaching/lecturing. Visit must be at least three weeks in length and no longer than three years. Required credential is generally the terminal degree per academic field, usually a PhD or other doctorate.

**Research Scholar:** More than 50% of visitor's time must be spent conducting research. Visit must be at least three weeks in length and no longer than three years. Required credential is generally a master's degree or higher. Visitors currently engaged in a doctoral program may be permitted in this category, but only if a tangible outcome to benefit Morgan State University can be documented.

**Short-term Scholar:** Scholars coming to the United States for a period of no more than six months. This category may not be extended. Required credential is generally a master's degree or higher. If participant is visiting as part of a cohort for professional training, the minimum credential is generally a bachelor's degree.

• Non-Degree or Research Student: At the undergraduate level, at least 12 credits per semester is the required MSU enrollment. At the graduate level, there must be Morgan State University enrollment, but the number of credits will be determined by Exchange Visitor Program Responsible Officer (CGS staff) and supervising MSU faculty member.

## Section Six: Contact Information for Prospective Visitor

Email address: Phone #:

Mailing address for visa/invitation packet:

# Section Seven: Financial Information

## **Required minimum funding:**

Exchange visitor: at least US \$1500 per month Exchange visitor and one dependent: US \$2250 per month Exchange visitor and two dependents: US \$2625 per month Each additional dependent: add US \$375 per month

Specify all sources of financial support for this visitor during the length of the requested exchange.

**ATTACHMENTS:** Each source of support listed must be verified by separate, original documentation, such as letter from employer, bank statement, scholarship/fellowship award letter, etc. which specifies details about visitor, activities length of stay, and amount of money.

Page 4 of 7



rt from Morgan State University:
Description (e.g., stipend, teaching salary, reimbursement, value of housing, per s total):
Description:
Description:
Description:
rt from Employer, Fellowship, Home Government, Other:
Description (e.g., international airfare, ground transportation, stipend, health as, continuation of salary during sabbatical, per diem, housing allowance, owance):
Description:
Description:
if necessary to bring to minimum required support and/or for dependents:
Description (e.g., name and location of bank or other savings instrument, type of

# Section Eight: Prospective Visitor's Prior Activity in the United States

Is the visitor already in the United States?  $\Box$  Yes  $\Box$  No. If yes, enclose photocopies of current Immigration documents (U.S. visa; Form I-94; any of the following Forms: DS-2019, I-20, I-797). And if visitor is currently in the U.S. in J-1 status, also complete the following:

Program Sponsor: \_\_\_\_\_\_ J-1 Category: \_\_\_\_\_

Start date: \_\_\_\_\_\_ End date: \_\_\_\_\_\_ (All can be found on current Form DS-2019.)

Has visitor ever been to the U.S. prior to this visit? $\Box$ Yes $\Box$ No. If yes, enter U.S.
Taxpayer Identification Number or Social Security Number, if ever assigned one:
and also fill in the chart below.



Visa Category	Start Date	End Date	Location/Activity

Note: It is essential to have information on all prior J visa visits to the United States.

------Verifications Section-----

## Health (Accident and Sickness) Insurance Requirement

The coordinating faculty member, department chairperson, and college dean acknowledge, by signing this document that they have been informed about the mandatory health insurance requirement for all J-1 visitors and any accompanying J-2 dependents, and will provide this information to the prospective visitor. The specific procedures and requirements are:

- (1) Provide *Mandatory Health Insurance Requirement Compliance Agreement* to visitor. This will be in the packet provided by ISSO.
- (2) Upon arrival at Morgan State University, each exchange visitor must present to the ISSO evidence of adequate health insurance coverage throughout the requested period of stay in the United States. The J-1 and J-2 visas have the following federally mandated requirements:
  - Medical benefits of at least \$50,000 per accident or illness
  - A deductible not to exceed \$500 per accident or illness
  - Repatriation of mortal remains in the amount of at least \$7,500
  - Expenses associated with medical evacuation in the amount of at least \$10,000.
- (3) If the visitor does not have the required minimum insurance coverage in effect, s/he must purchase a supplemental policy to cover the entire period of the visit. Please request ISSO for information about appropriate polices, if needed.



# Signatures Approving This Visit/Visitor and All Information Provided in This Form:

Faculty Coordinator, Chair, and Dean should review proposed activities, sources of funding, and the statement above about Mandatory Health Insurance before supporting this request in the signature box below.

Coordinating Faculty Member Printed Name	Signature	Date
Department Chairperson Printed Name	Signature	Date
Dean of College Printed Name	Signature	Date
Provost and Vice President of Academic Affairs Printed Name	Signature	Date