# Welcome to the J-1 Student Intern DS-2019 Application in Cystart

# When should you use this Cystart request?

Complete this request to bring a future Student Intern as an Exchange Visitor in J-1 non-immigrant status after the department's internship has been approved by the Provost's Office. <u>NOTE</u>: This is a different approval process than the one for a Visiting Scholar.

# **Overview of J-1 Student Intern DS-2019 Application**

### Eleven e-forms in the application:

- (1) J-1 Student Intern Eligibility
- (2) English Proficiency Verification
- (3) Personal and Academic Information
- (4) U.S. Immigration History
- (5) Dependents (Spouse / Children)
- (6) Personal Financial Support
- (7) ISU Financial Support
- (8) Internship Information
- (9) Internship Goals and Objectives
- (10) Export Control Worksheet
- (11) Departmental Compliance Certification for J-1 Student Intern

# **Completion and Routing for each e-form**

See pages 2-9

Screen shots may look slightly different from the actual e-forms. The down triangle in a field [ $\bullet$ ] indicates a drop-down menu. In the interest of space, we have not included all the options in the drop-down fields in this overview.

STUDENT INTERN COMPLETES THESE FIVE E-FORMS AFTER YOU HAVE GIVEN THEM ACCESS \*\*ONLY GIVE ACCESS TO E-FORM #2 AND THE STUDENT INTERN WILL GET ACCESS TO ALL E-FORMS\*\* NOT NECESSARY TO GIVE ACCESS TO EACH E-FORM INDIVIDUALLY

### (1) J-1 Student Intern Eligibility – Step 1

 Cystart User coordinating the request provides their contact information and enters contact information for the person to whom the J-1 Student Intern Eligibility e-form should be routed—the supervisor of the internship—to confirm the eligibility of the Student Intern.

IAIN PAGE   TEMP861438   HERMIONE GRANGER	Prospective stude	nt intern:		
) Information Required		a degree program at this foreign institutio		tution. the degree program after this
urpose of J-1 Student Intern Application		sufficient proficiency	/ in the English	language per U.S. Department
omplete this request to bring an individual for the U.S. Department of State's BridgeUSA tudent Intern Program.	State regulat			
erson coordinating this Student Intern request	the Office of the	ship Program Reques Senior Vice Present a		
IENT RECORD: HERMIONE GRANGER   TEMP861438	program listing." • Yes	•	No	
ll name*	Upload approved	d Internship Program	Request form	*
J Position*	Select File			
▼			Senior Vice Pre	Request form can be found on esent and Provost "pre-approve
one number (xxx-xxx-xxxx)*	OR	Yes		No
99-999-9999 J e-maij*	Upload Participati	internship to th	e Office of the before conti	Approval form for this e Senior Vice President and nuing with this request. signed by all *
verview of Requirements for J-1 Student Intern Program	Select File	0	·	
wa State University Policies				
ease review the information under the <b>Internships</b> heading on the Office of the Senior		who has been offer	red this interr	iship
ce President and Provost website (see link below) for information on developing an ternship program, the forms associated with this process, and the responsibilities of the epartment offering the internship.	Full name*			
/PP Internship Requirements	Person supervisi	ng internship to con	ifirm agreeme	ent to conditions of internshi
S. Department of State Student Intern Program Policies	Full name*			
ternship will:				
fulfill educational objects for current degree program.	ISU e-mail*			
<ul> <li>be a minimum of 32 hours per week.</li> </ul>				
not include clinical patient care or contact	Re-type ISU e-mail*			

- The internship supervisor receives an email from issoscholar@iastate.edu with instructions to complete the J-1 Student Intern Eligibility e-form. Once there, they will be asked to confirm the following statements, the last six of which include U.S. Department of State Student Intern Program Policies:
  - □ Internship meets the "trainee/learner" criteria according to the U.S. Department of Labor.
  - □ Prospective student intern is enrolled in a degree program at a foreign institution.
  - Prospective student intern will return to this foreign institution to continue the degree program after this internship is completed.
  - □ Internship will fulfill educational objectives for current degree program.
  - □ Internship will be a minimum of 32 hours per week.
  - □ Internship will not include clinical patient care or contact.
  - □ I understand ISSO must verify each Student Intern demonstrates sufficient proficiency in the English language to successfully participate in his or her program activity and to function on a day-to-day basis, per U.S. Department of State regulations.

## • J-1 Student Intern e-forms (2) through (6)

 Cystart User coordinating the request opens the (2) English Proficiency Verification and clicks on "GIVE THE CLIENT ACCESS TO COMPLETE THIS SECTION" to route it and the next four e-forms to the Student Intern to complete.



 Student Intern receives an email from <u>isso@iastate.edu</u> with instructions to complete the e-forms: (2) English Proficiency Verification, (3) Personal and Academic Information, (4) U.S. Immigration History, (5) Dependents (Spouse / Children), and (6) Personal Financial Support.

(2) English Proficiency Verification		Situation #2:	
MAIN PAGE   J-1 Student Intern DS-2019 Application	English Proficiency Documentation	Situation #2.	
(*) Information Required	The U.S. Department of State's BridgeUSA program <b>requires</b> each participating scholar to demonstrate sufficient proficiency in the English language, as determined by an objective	Are you currently in the U.S. in J-1 status now?*  Yes  No	
Purpose of this e-form	measurement, to successfully participate in his or her program activity <b>and</b> to function on a day-to-day basis on campus and in the local community.	Options to Document English Language Proficiency	
Collect information from a potential student intern to determine English language proficiency for participation in the BridgeUSA Student Intern Program.	Situation #1:	The International Students and Scholars Office offers the following options to document English language proficiency. Minimum scores are subject to change.	
Instructions to potential student intern for completing this e-form		English3 Interview Results (within the last 2 years, minimum 3.0)	
	Are you currently in the U.S. in J-1 status now?*	Duolingo English Test Results (within the last 2 years, minimum 70)	
Please do not use ALL CAPS, accents or hyphens in this e-form.	Yes No	TOEFL iBT Score Report (within the last 2 years, minimum 40)	
If a document is not in English, both the original document <u>and</u> an English translation <b>must</b> be uploaded. You may do the translation yourself.	Will you be transferring your active J-1 SEVIS record to Iowa State University or extending your J-1 program at Iowa State University?#	<ul> <li>IELTS Test Results (within the last 2 years, minimum 5.0)</li> <li>PTE Academic Results (within the last 2 years, minimum 38)</li> <li>Cambridge English Assessment (within the last 2 years, minimum 154)</li> <li>Proof of degree completion from a school where the language of instruction was</li> </ul>	
Documents must be saved in <b>PDF or JPEG</b> format to upload to e-form. Only one PDF may be uploaded to a field.	Since you will be transferring your current, active J-1 SEVIS record to lowa State	Proof of degree completion from a school where the language of instruction was English (bachelor's degree or higher)     English is the only official language of your country of citizenship	
If you fail to complete a required field, you will receive an error message. All uploaded	University, or <b>extending</b> your existing J-1 SEVIS record at lowa State University, you are not required to provide documentation of your English proficiency.	Which option would you like to select?*	
PDF documents will need to be uploaded again once you return to the e-form to complete the missing field or fields.	Submit		
Potential student intern completing this e-form		Submit	
Full name*			

### (3) Personal and Academic Information

(5) Personal and Academic Information		Permanent Home Address Information
MAIN PAGE   J-1 Student Intern DS-2019 Application	Province of birth (enter N/A if not applicable)*	
(*) Information Required		Street 1*
	State of birth (enter N/A if not applicable)*	
Purpose of this e-form		Street 2
Collect information from a potential Student Intern to determine eligibility for the Student Intern Program and to prepare Form D5-2019, required to apply for a J-1 visa and for	Country of birth*	
entry to the United States in J-1 non-immigrant status.	•	City*
Instructions for completing this e-form	Country of citizenship*	
	•	State (enter N/A is not applicable)*
Please do <b>not</b> use ALL CAPS, accents or hyphens in this e-form.	Country of legal permanent residence (would not be the U.S.)*	
If a document is not in English, both the original document <u>and</u> an English translation <b>must</b> be uploaded. You may do the translation yourself.	•	Province (enter N/A if not applicable)*
	Upload passport demographic page *	
Documents must be saved in <b>PDF or JPEG</b> format to upload to e-form. Only one PDF may be uploaded to a field.	Select File	Country*
	Academic Qualifications	Ť
If you fail to complete a required field, you will receive an error message. All uploaded PDF documents will need to be uploaded again once you return to the e-form to complete		Postal code*
the missing field or fields.	Name of current school (home institution) where you are pursuing your degree.*	
Biographical Information for Forms DS-2019 and DS-7002		Phone number (country code + city code + personal phone number)*
Passport surname (family/last name)*	Country where home institution is located*	Prone number (country coue + city coue + personal prone number)-
	•	
Passport given name (first name)*	Current field of study*	E-mall address*
Date of birth*	At what level are you studying?*	U.S. Social Security Number
MM/DD/YYYY	•	
Gender*	When will you complete this degree?*	Do you have a U.S. Social Security Number?*
· · · · · · · · · · · · · · · · · · ·	MM/DD/YYYY	O Yes O No
City of birth*	Most recent occupation in your home country*	Save Draft Submit
	•	
	Please upload your C.V. or resume *	

Select File

(4) U.S. Immigration History MAIN PAGE | J-1 Student Intern DS-2019 Application (\*) Information Required Purpose of this e-form Collect information from a potential student intern to determine eligibility for the BridgeUSA Student Intern Program, and to prepare Form DS-2019, required to apply for a J-1 visa and for entry to the United States in J-1 non-immigrant status. Instructions for completing this e-form Please do not use ALL CAPS, accents or hyphens in this e-form. Documents must be saved in **PDF or JPEG** format to upload to e-form. Only one PDF may be uploaded to a field. If you fail to complete a required field, you will receive an error message. All uploaded PDF documents will need to be uploaded again once you return to the e-form to complete the missing field or fields. History of Previous Stays in the U.S. Are you currently in the U.S.?\* O No O Yes Have you come to the U.S. in the past?\* O Yes O No

### (5) Dependents (Spouse / Children)

MAIN PAGE | J-1 Student Intern DS-2019 Application

(*)	Information	Required	
-----	-------------	----------	--

I have dependents coming to the U.S. with me.\* Yes O No Save Draft Submit

# (6) Personal Financial Support

### MAIN PAGE | J-1 Student Intern DS-2019 Application

### (\*) Information Required

### Purpose of this e-form

This e-form provides information about the J-1 Student Intern's non-ISU financial support for the internship.

Save Draft Submit

#### Instructions for this e-form

If personal funds will be used to support your J-1 Student Intern Program, a personal bank statement can be provided to show proof of the availability of funds. We do not accept salary statements as proof of funding.

If a document is not in English, both the original document <u>and</u> an English translation <u>must</u> be uploaded. You may do the translation yourself.

Documents must be saved in **PDF or JPEG** format to upload to e-form. Only one PDF may be uploaded to a field.

Please note that you may be required to show proof of finances to the U.S. Embassy or Consulate at the time of application for an entry visa.

### Instructions for calculating expenses

Estimated support **must not** include include support for your travel to and from the U.S., nor for time spent in the U.S. prior to or after the program dates for your activity at ISU. Financial support for travel included in a scholarship must be deducted when calculating support for your program activity.

Determine funding required per month based on amounts in above chart and multiply by number of months for J program.

Financial support for all family members is also calculated on the length of your Student Intern Program, even if they who will join you for only a portion of your stay.

#### Required health insurance coverage

Both the U.S. Department of State and Iowa State University require participants in a J-1 Student Intern Program to have health insurance coverage for the duration of their program, regardless of length, at Iowa State University. For J-1 exchange visitors, this also includes coverage for all J-2 dependents.

lowa State University policy requires all J-1 Student Interns, and their dependents, to enroll in the **ISU Student and Scholar Health Insurance Plan**.

The ISU Student and Scholar Health Insurance Plan cannot be prorated. For example, a stay from May 15 to August 15 would require four months of insurance coverage, not three.

### Calculation of total expenses for Student Intern Program

Below are the minimum monthly estimates which include both the scholar and dependents. These estimates are for programs that will continue beyond August 1, 2023. Rates are subject to increase effective August 1, 2024.

### Rates include one child. Add \$536 per month for each additional child.

#### NOTE: Actual e-form will have up-to-date information Basic Living Health Monthl Insurance Total Expense

	\$1,519	\$276	\$1,795
Scholar and Spouse	\$2,055	\$578	\$2,633
Scholar and Child	\$2,055	\$490	\$2,545
Scholar and Family	\$2,590	\$792	\$3,382

I have a spouse coming to the U.S. as my J-2 dependent.  $\!\!\!\!\star$ Yes No

#### I have a child(ren) coming to the U.S. as my J-2 dependent(s).\* Yes No

#### SSHIP Expenses

Number of calendar months in internship (Example: May 15 - July 15 is 3 calendar months, not 2)\* 0

SSHIP expenses expected (Example: If you are a single intern staying May 15-July 15, take 3 x \$276 = \$828)\* 0

#### Estimated Living Expenses

Length of internship in months (Example: May 15 - July 15 is 2 months in length)\*

0

Estimated Living Expenses (Example: If you are a single intern staying May 15-July 15, take 2 x \$1519 = \$3038)\*

0

### TOTAL Expenses

Total estimated expenses for scholar, plus family if applicable, for length of Student Intern Program (Add SSHIP and Estimated Living Expenses)\*

#### Funding from ISU sources

Will your ISU host department provide any financial support for your internship?\* Yes No

#### Funding from non-ISU sources

Will you receive funding from non-ISU sources (examples: personal funding, scholarship, grant, etc.)?\* Yes No

### Confirmation of total funding for Student Intern Program

Total estimated expenses*	
0	
Total ISU funding*	
0	
Total non-ISU funding*	
0	

The total sum of my funding equals or exceeds the total sum of my estimated expen





0

### • (7) ISU Financial Support – Step 1

 Cystart User coordinating the request enters contact information for the person to whom the ISU Financial Support e-form should be routed—Internship Supervisor, Department Admin, or Self—to provide information regarding any departmental funding or reimbursements being offered to the Student Intern.

MAIN PAGE   TEMP8	nancial Support 361438   HERMIONE GRANGER
*) Information Requi	
This e-form provides for the internship.	information about the ISU host department's financial contribution
Person to provide ir	nformation about ISU funding for the internship
	below to forward this e-form to the person best situated to provide ISU internship, mostly like the supervisor.
CLIENT RECORD: HER	RMIONE GRANGER   TEMP861438
Fo whom are you forwa	rding this e-form?*
Full name*	
SU e-mail*	
Re-type ISU e-mail*	
Save Defaults	Save Draft Submit

- (7) ISU Financial Support Step 2
  - The person designated to provide information regarding any departmental funding of the Student Intern receives an email from <u>issoscholar@iastate.edu</u> with instructions to complete the ISU Financial Support e-form as shown below:

Additional Funding from ISU Host Department

### (7) ISU Financial Support

CLIENT NAME & ID NUMBER: HERMIONE GRANGER   ******1438	
COMMENTS / REVIEW FOR (7) ISU FINANCIAL SUPPORT	The host department will pay a stipend to this student intern*           Yes         No
Purpose of this e-form	
This e-form provides information about the ISU host department's financial contribution for the internship.	Host is providing additional in-kind support (e.g. meals and/or lodging with a family)*
ISSO Scholar Support Fee	Did you answer YES to any of the questions on this e-form, including the SSHIP health
The host department will be assessed a \$100 Scholar Support Fee for this J-1 Student Intern request.	Ves     No
Please enter a worktag for the Scholar Support Fee*	SubmitOR
NOTES:	Additional Funding from ISU Host Department
Finance Delivery cannot accept "AWD" worktags; please provide the GR# associated with that worktag instead.	
If your worktag requires a DD#, please provide it so Finance Delivery can process the billing.	The host department will pay a stipend to this student intern*
Required health insurance coverage	Stipend rate (numbers only)*
required nearth instrance coverage	0
Both the U.S. Department of State and Iowa State University require participants in a J-1 Student Intern Program to have health insurance coverage for the duration of their program, regardless of length, at I owa State University. For J-1 exchange visitors, this also includes coverage for all J-2 dependents.	Indicate frequency of pay*
lowa State University policy requires all J-1 Student Interns, and their dependents, to	Total amount of stipend for period of internship (numbers only)*
enroll in the ISU Student and Scholar Health Insurance Plan. Please follow link to view current monthly SSHIP fees.	0
It is important to note that the ISU Student and Scholar Health Insurance Plan cannot be pro-rated. A full month's insurance fee (includes the health insurance premium plus a health facility fee) will be charged no matter what day the scholar or visitor arrives and leaves. The host department is required to cover the insurance payment for their scholar in the event that the scholar defaults on the payments.	Host is providing additional in-kind support (e.g. meals and/or lodging with a family)*
	Did you answer YES to any of the questions on this e-form, including the SSHIP health insurance question? $\!\!\!\!\star$
Questions regarding this requirement, the plan, enrollment, etc. should be directed to University Human Resources at <b>isusship@iastate.edu</b> .	Yes     No
· · · · · · · · · · · · · · · · · · ·	Upload Letter of Invitation (or other support letter) from host to intern, itemizing support department will provide. *
ISU host will cover the SSHIP health insurance expense for the duration of the internship.*	
Ves No	Select File

#### (8) Internship Information – Step 1 •

o As with the ISU Financial Support e-form, Cystart User coordinating the request enters contact information for the person to whom the Program Information e-form should be routed-Internship Supervisor, Department Admin, or Self—to provide details regarding the Student Intern's internship.

#### (8) Internship Information – Step 2 ٠

o The person designated to provide information regarding the Student Intern's internship receives an email from issoscholar@iastate.edu with instructions to complete the Program Information e-form as shown below:

(8) Internship Information	Internship Information
t) Information Required	Academic field of internship*
LIENT NAME & ID NUMBER: HERMIONE GRANGER   ******1438	<b>↓</b>
OMMENTS / REVIEW FOR (8) INTERNSHIP INFORMATION	
urpose of the Bridge USA Student Intern Program	If Academic Field you seek is not listed, select "00.0000 – None" from the drop down list and find the appropriate CIP code at link provide
omplete this e-form to bring an individual for BridgeUSA's Student Intern Program for an pproved internship on the lowa State University campus.	Please paste it into the description box along with the general description of research activity.
tudent interns may stay for up to one year and must be in the middle of a degree rogram at their home institution outside the U.S.	You may also search the Classification of Instructional Program to find the appopriate academic field for the internship. The CIP website address is https://nces.ed.gov/ipeds/cipcode/Default.aspx?y=56.
he Student Intern program requires the internship to be a minimum of 32 hours per eek.	Provide a brief, general description of the research activity (e.g. Research in malze gene structure)*
urpose of the J-1 Student Intern Internship Information e-form	
rovide information for the Forms DS-2019 and DS-7002.	
eneral Information 'idge USA Program*	The program start and ends dates reflect the internship dates only. Please do not include travel time prior to the beginning of the internship or after the end of the internship.
Student Intern	Please choose program start and end dates that fall on ISU work days
nployer ID number*	Start date*
426004224	MM/DD/YYYY
the internship covered by ISU's Worker's Comp policy?*	End date*
	Hours per week for internship*
J's Woker's Comp policy* iedgwick Claims Management Services, Inc.	
umber of FT employees *	Primary internship location
3480	General site location*
nual revenue	lowa State University of Science and Technology
25 Million or More	Primary internship location
ternship supervisor's information	General site location*
Iname*	Iowa State University of Science and Technology
H TAMITA	Building street address and office number (ex: 2416 Pammel Dr #201)*
title*	
	Full department name (ex: Department of Chemistry)*
J phone number (xxx-xxx-xxxx)*	
99-999-9999	City, State, Postal Code*
nail address*	Ames, IA 50011
	Website URL for ISU department*

### Additional internship location

Will the student internship occur solely on the ISU campus?\* O Yes O No

Submit

- (9) Internship Goals and Objectives Step 1
  - As with the two previous e-forms, Cystart User coordinating the request enters contact information for the person to whom the Internship Goals and Objectives e-form should be routed—Internship Supervisor, Department Admin, or Self—to provide details regarding the Student Intern's internship.
- (9) Internship Goals and Objectives Step 2
  - The person designated to provide information regarding the Student Intern's internship receives an email from <u>issoscholar@iastate.edu</u> with instructions to complete the Internship Goals and Objectives e-form as shown below:

(9) Internship Goals and Objectives (*) Information Required	How, specifically, will these knowledge, skills or technologies be taught? Include the specific tasks and activities to be completed for this phase.
CLIENT NAME & ID NUMBER: HERMIONE GRANGER   ******1438	
COMMENTS / REVIEW FOR (9) INTERNSHIP GOALS AND OBJECTIVES	How will the Student Intern's acquisition of new skills and competencies be measured during this phase?*
Purpose of the J-1 Student Intern Internship Goals and Objectives e-form	
Provide goals and objectives information for the Form DS-7002 Training/Internship Placement Plan (T/IPP).	Additional phase remarks.
T/IPP Contract Agreement	
Note on phases: Most internships will be short enough that there will be only one phase. For longer internships, you may submit multiples of this e-form for additional phases.	
Phase number*	Internship evaluations will be submitted to ISSO within 30 days following the completion of the internship. *
Phase Name (ex: Research in theoretical chemistry)*	Sufficient resources, plant, equipment, and trained personnel will be available to provide the
Start date*	internship program. *
End date *	Internship evaluations will be submitted to ISSO within 30 days following the completion of the internship. *
Description of Student Intern's role for this phase.*	Sufficient resources, plant, equipment, and trained personnel will be available to provide the internship program. *
Specific goals and objectives for this phase*	Continuous on-site supervision and mentoring of the Student Intern will be provided by experienced and knowledgeable staff. *
Names and titles of those who will provide continuous (for example, daily) supervision of the Student Intern, including the primary supervisor. What are these person's qualifications to teach the planned	The Student Intern will not displace full-time, part-time, temporary, or permanent American workers, or serve to fill a labor need. *
learning?*	Submit
What plans are in place for the intern to participate in American cultural activities (required by U.S. Department of State policy)?*	
What specific knowledge, skills or techniques will be learned?*	

# • (10) Export Control Worksheet – Step 1 (note that this process is different from the old J-1 Cystart requests)

 Cystart User coordinating the request follows the instructions for the Export Control Worksheet, then uploads the completed worksheet to the Export Control Worksheet e-form and routes it to the Office of Research Ethics. The <u>export@iastate.edu</u> e-mail address cannot be edited since this e-form must be sent to that address. (*This process is different for Ames Lab Student Interns.*)

(10) Export Control Worksheet	Instructions for this e-form
MAIN PAGE   TEMP861438   HERMIONE GRANGER	Step 1
(*) Information Required	Go to the <b>Office of Research Ethics website</b> for the Export Control Worksheet (ECW). Follow the instructions within the ECW.
Person routing this e-form	Step 2
CLIENT RECORD: HERMIONE GRANGER   TEMP861438	Upload a PDF of the completed and signed ECW to this e-form and click "submit" below.
Full Name*	Step 3
	ORE will review the submitted ECW and will upload the ECW into Cystart once approved.
	Step 4
Purpose of this e-form	You will receive an email from ISSO confirming that ORE submitted the approved ECW into Cystart.
Approval and submission of Export Control Worksheet by the Office of Research Ethics.	Export Control Worksheet
As part of every J-1 application and/or extension, the university must determine whether or not an export license for access to controlled technology or technical data is required for the J-1 activity under the federal Export Administration and International Traffic in Arms regulations. If an export license is required, the hiring unit must not release or otherwise provide access to controlled technology or technical data to the employee until it has received from the U.S. Government the required authorization to do so.	Upload completed and signed ECW *
Very few lowa State University employees require an export license. The Office of	Routing E-Form to Office of Research Ethics
Research thick will notify you if a license is required and assist you with the licensing process.	Office of Research Ethics (ORE) Contacts:
	Matt House, 4-0269 Brooke Langlitz, 4-7793
This request is for a current or future Ames Lab student intern.*	ORE e-mail*
Ves No	export@iastate.edu
	Re-type ORE e-mail*
	export@iastate.edu
	Submit

### • (10) Export Control Worksheet – Step 2

- Office of Research Ethics receives an email from <u>issoscholar@iastate.edu</u> with instructions to complete the e-form.
- Office of Research Ethics staff will approve the *Export Control Worksheet,* re-upload it to the Export Control Worksheet e-form, and then submit the J-1 Export Control Worksheet e-form.
- Office of Research Ethics staff will send an email notification that the *Export Control Worksheet* has been approved, with an attached copy of the worksheet. Cystart will also send an e-mail that the Export Control Worksheet e-form has been completed.

# • (11) Departmental Compliance Certification for J-1 Student Intern – Step 1

- Cystart User coordinating the request completes information regarding delivery of the finished Form DS-2019 and to whom—Department Chair, Office Director, Unit Head—the Departmental Compliance Certification for J-1 Student Intern e-form should be routed to certify compliance with responsibilities as the "host" of an exchange visitor in J-1 nonimmigrant status.
  - Please note that the Departmental J-1 Compliance Certification e-form can be accessed at any time you wish for routing to the department chair. You do not need to wait until all previous eforms have been completed. ISSO will begin processing the request when all e-forms have been submitted.

### (11) Departmental Compliance Certification for J-1 Student Intern

	ISSO Process
MAIN PAGE   TEMP861438   HERMIONE GRANGER	ISSO receives an alert and begins work on the Forms DS-2019 and DS-7002 required for
(*) Information Description	the J-1 Exchange Visitor to apply for a visa and enter the United States.
(*) Information Required	
	Please allow up to ten work days for your request to be processed.
Department of State J-1 regulations require the institution to assume numerous legal	Effective 4/27/2023, Department of State regulations now allow the
responsibilities to sponsor an J-1 Exchange Visitor. The international office has responsibility for ensuring institutional compliance with these regulations, but	electronic transmission of the Form DS-2019.
departments must agree to follow established University procedures in order to ensure	
compliance.	Once the DS-2019 and DS-7002 are prepared for your student intern, an ISSO staff
Person routing this e-form	member will email the electronic version to your new student intern, and will notify the department that the email has been sent.
	department that the emain has been sent.
CLIENT RECORD: HERMIONE GRANGER   TEMP861438	If your department desires to mail a paper copy of the DS-2019 and DS-7002 instead, please indicate this below, noting the delivery method preferred.
Full name*	
	Does your department want to mail a paper copy of the DS-2019 and DS-7002 to the exchange visitor instead of ISSO emailing the electronic version?*
ISU e-mail*	
	Ves No
Phone (xxx-xxx-xxxx)*	
	If so
999-999-9999	
Routing this e-form to a Second Approver	Who will mail the DS-2019, DS-7002, and accompanying packet to the future Student
Routing this e form to a second Approver	Intern?
Please route this e-form to the department chair or unit director for their approval.	Full name*
The person designated on this form will receive an e-mail from isso@iastate.edu	
containing a link to the application for review and approval.	Campus address*
	Campus address
I am routing this e-form to:	
	Campus phone (xxx-xxx-xxxx)*
Department / Division / Unit*	
	999-999-9999
College / Unit*	Delivery method*
•	*
	Important Natas
Full name of Department Chair/Division or Unit Director*	Important Notes
	Please notify ISSO if the exchange visitor cannot arrive and check in with the ISSO on or
	before the start date on Form DS-2019. This advance notification allows ISSO to amend
Position title*	the program start date on Form DS-2019 to prevent it from cancellation by the Department of State and the Human Resource Coordinator to adjust the the appropriate
	date in Workday.
ISU e-mail*	Submit
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in the second se	

### • (11) Departmental Compliance Certification for J-1 Student Intern – Step 2

- The person designated to complete this e-form receives an email from <u>issoscholar@iastate.edu</u> with instructions to complete the Departmental Compliance Certification for J-1 Student Intern e-form.
- Designated Department Chair, Office Director, or Unit Head completes the Departmental Compliance e-form.
  - Note that this person will be able to view only the information and document uploads that have been included in the application at that time.

# Confirmation that J-1 Student Intern DS-2019 Application is Complete and Submitted to ISSO

The HRC or Department Admin coordinating the application will receive an e-mail message from <u>issoscholar@iastate.edu</u> when the chair, office director, or unit head has submitted the Departmental Compliance e-form.

The status of the **eleven e-forms** in the application should appear as follows:

- (1) J-1 Student Intern Eligibility Will be marked "Submitted."
- (2) English Proficiency Verification Will be marked "Pending," when the scholar submits the e-form, and the status will go to "Approved" after ISSO has determined that the Visiting Scholar's documentation meets J-1 English proficiency requirements.
- (3) Personal and Academic Information Will be marked "Submitted."
- (4) U.S. Immigration History Will be marked "Submitted."
- (5) Dependents (Spouse / Children) This is an optional e-form, but if submitted, it will be marked "Submitted."
- (6) Personal Financial Support Will be marked "Submitted."
- (7) ISU Financial Support Will be marked "Pending Review" as ISSO references this e-form for the ISSO Scholar Support Fee billing. It will be marked "Approved" once ISSO bills the Scholar Support Fee to the Worktag that was provided and receives word from Finance Delivery that the payment has posted to ISSO. This e-form may remain in pending status several months beyond the completion of the request, but does not delay the process of issuing the DS-2019.
- (8) Internship Information Will be marked "Submitted."
- (9) Internship Goals and Objectives Will be marked "Submitted."
- (10) Export Control Worksheet Will be marked "Submitted."
- (11) Departmental Compliance Certification for J-1 Student Intern Will be marked "Pending Review." ISSO changes the status of this e-form to "Approved" when the Forms DS-2019 and DS-7002 are ready to release to the student intern.