

California State University San Bernardino
VISITING SCHOLARS (J-1) INFORMATION PACKET

For a prospective scholar or employee who is not a U.S. citizen or permanent resident

Please **complete and return** the following materials to the Center for International Studies and Programs 90 days before the start of the Visiting Scholar's program:

- ___ I. Information Packet (Sec. A-F)
- ___ II. Degree Certificate and English Level Placement (See Sec. A.10 & A.11)
- ___ II. Curriculum Vita (See Sec. A.12)
- ___ III. PAD: Proposed Activity Description (See Sec. B.4)
- ___ IV University recommendation letters in support of your visit (See Sec. B.5)
- ___ V. Documentation of funding (See Sec. C)
- ___ VI. Copies of visa documents (See Sec. D.3)
- ___ VII. Family Support documents (See Sec. E.3)
- ___ VIII. Health Insurance (See Sec. F)
- ___ IX. Scholar Contract

For Visiting Scholar:

Check the Applicable Box: Initial Request for J-1 Exchange Visitor Transfer of J-1 Program (See Sec. E)

A. INFORMATION ABOUT THE INTERNATIONAL SCHOLAR

1. Name (As it appears in the passport) _____
Family name _____ Given name _____ Middle name _____
2. Date of Birth _____ Place of Birth _____ Male ___ Female ___
month/day/year _____ City/Country _____
3. Country of Citizenship _____ Country of legal permanent residence _____
4. Current Address _____
mailing address, including country _____
5. Email Address _____ Phone number _____
- SKYPE Address _____
6. Emergency Contact _____ Relationship _____
Telephone Number _____ Email: _____
7. Position title in home country _____
8. Please check appropriate category/categories for position in home country: Faculty ___ Researcher ___ Other _____
9. Name of home-country institution _____
10. Highest Academic Degree _____ Scholar's specialized field _____
11. TOEFL Score (if any) _____ IELTS Score (if any) _____ Chinese College English Test Level Passed: _____
English Study: From _____ To _____ **Please attach copies of degree certificate and English level placement. Minimum score needs to be TOEFL (iBT 61 or PBT 500), IELTS (5.5 band score). Anything less will be assessed with a skype interview.**

12. Attach an original copy of resume or curriculum vita.

Your Current Curricula Vitae (CV) must be submitted in English and include details regarding your educational background, academic qualifications, publications, relevant awards/honors and significant instructional and research presentation experience.

B. INFORMATION ABOUT THE APPOINTMENT/ACTIVITY

1. Initial visit period for which funding is guaranteed (month/day/year) From _____ To _____
2. Specific Subject/Field to be engaged in is _____
3. Specific Activity: Research ___ Teaching ___ Certificate program ___ Other _____

4. Attach a proposed activity description.

In a separate document, please submit a typed plan of no more than 500 words.

- The Academic Plan provides an opportunity to evaluate the academic goals and compatibility of the candidate. It also provides information regarding the candidate's specific area of interest, academic expertise and proposed study plan
- **The format should include: 1 Introduction; 2 Objectives; 3 Method; 4 Approach; 5 Timeline; and, if applicable, 6 References**
- The Academic Plan should also include a statement reflecting your thoughts about how you will contribute to multicultural enrichment and understanding of your country, traditions, culture, history, language, etc. during your stay.

5. Attach University recommendation letters in support of your visit from your Dean and Department Chair.

C. SOURCE AND AMOUNT OF FINANCIAL SUPPORT

The required minimum support is \$1,500 per month for the scholar, \$1000 per month for a spouse and \$500 per month for each child. This does not include furniture, health insurance and child care expenses.

Please include funding information for the ENTIRE initial visit period listed in Sec.B.1 above:

- | | |
|---|------------------|
| a) CSUSB (specify payroll, honorarium, per diem): _____ | Amount: \$ _____ |
| b) U.S. Government Agency: _____ | Amount: \$ _____ |
| c) Visitor's Government/Sponsor: _____ | Amount: \$ _____ |
| d) Other (specify): _____ | Amount: \$ _____ |
| e) Personal Funds _____ | Amount: \$ _____ |

Total funding for the initial visit period: Amount: \$ _____

Written verification (in English, and amounts in U.S. dollars) is required for financial support not provided by CSUSB (e.g., official letter from Visitor's Sponsor; bank statement for personal funds).

D. U.S. VISA HISTORY

1. Is the scholar currently in the U.S.? Yes ___ No ___
If yes, please indicate current immigration status _____ and check one:
___ S/he will be leaving the U.S. and returning before s/he begins the appointment at CSUSB.
___ S/he will be requesting a transfer of his or her current J-1 status.
___ S/he will be requesting a change of immigration status from _____ status to J-1 status.
2. During the past twelve months, has the scholar been in the U.S. in any visa classification other than tourist?
Yes ___ No ___ If yes, visa status _____ Dates _____

3. Please attach photocopies of passport and all current and/or previous visa documents including Form front and back of the I-94s, IAP-66s, I-20s, EAD cards, I-40, I148, DS2019s and/or H-1B approvals.

E. FAMILY INFORMATION

Please complete this section for family members who will travel with the scholar to the U.S. or who will arrive at a later date. Immediate family members only (spouse and unmarried children under age 21) are eligible for J-2 dependent status. Visiting Scholar and their family is required to live within 20 miles or 32 kilometers of CSUSB. Visiting Scholars and/or their dependents are allowed to be at CSUSB only for one year.

1. Will the scholar's family travel with him or her to the U.S.? Yes___ No___

2. If the family will arrive separately, when are they to arrive? _____

<u>Name of Family Member</u>	<u>Relationship</u>	<u>Date of Birth</u>	<u>City of Birth</u>	<u>Country of Birth</u>
<i>(Family name, given name, middle name)</i>				

3. Attach:

- a copy of proof of relationships
- a copy of dependent passports
- a letter from your immediate supervisor supporting that your primary purpose is for research, and you and your family will leave when the time granted for your visit is over
- a letter from the inviting professor supporting that your primary purpose is for research, and you and your family will leave when the time granted for your visit is over

I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct to the best of my knowledge.

Please Sign:

Visiting Scholar

Signature

Date

F. HEALTH INSURANCE COMPLIANCE FORM

To be signed by the prospective j-1 exchange visitor

I understand that the U.S. Information Agency requires all J-1 Exchange Visitors and their accompanying dependents to have health and accident insurance at the following minimum level of coverage:

- medical benefits of at least \$100,000 per accident or illness
- repatriation of remains in the amount of \$25,000
- expenses associated with medical evacuation in the amount of \$50,000
- deductible not to exceed \$500 per accident/illness

I understand that I am responsible for the purchase of health insurance that meets these requirements.

I understand the cost of this insurance.

Individuals upon arrival in the US may purchase health insurance which meets the minimum requirements. **If you don't have the required health insurance from another provider, you must purchase it through the Center for International Studies and Programs.**

If health insurance coverage is purchased from another source, the insurance corporation underwriting the policy must have one of the following ratings:

- an A.M. Best rating of "A-" or above
- an Insurance Solvency International, Ltd., (ISI) rating of "A-i" or above
- a Standard & Poor's Claimspaying Ability rating of "A-" or above
- a Weiss Research, Inc. rating of "B+" or above
- Insurance coverage backed by the full faith and credit of your home government meets these requirements.

I understand that U.S. government regulations require the University to notify the U.S. Information Agency and to terminate my J-1 exchange visitor status if they determine that my family members or I willfully fail to comply with the insurance requirements.

I understand the health insurance requirements, the costs involved, and the need to maintain the insurance throughout my stay at the California State University, San Bernardino.

Name(Print): _____

Family Name	Given Name	Middle Name
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Signature: _____ Date: _____

Scholar Contract at CSUSB

Purpose of Visit for Visiting Scholar

- Visiting scholar's primary responsibility at CSUSB in the Exchange Visitor program is to do research.
- Visiting Scholar must e-mail their department/mentor at CSUSB to discuss clarified expectations with the visiting scholar regarding the purpose of the exchange, faculty collaboration, benefits, length of program, and access to office/lab space, equipment and other department support.
- Visiting Scholar must attend workshops on progress and welfare of the scholar, including ensuring that s/he obtains advice and assistance to facilitate the successful completion of her/his exchange program.
- Visiting Scholar is required to live within 20 miles or 32 kilometers of CSUSB.
- Visiting Scholar will not come to CSUSB to seek political asylum, permanent residency or otherwise disappear and not report to CSUSB.

Unauthorized Employment

- Visiting Scholar will not engage in unauthorized employment.

Scholar Arrival and Check-In

- Visiting Scholar will notify CISP of arrival on campus and attend a mandatory orientation with the CISP office.

Change of Address

- Visiting Scholar will notify the CISP office of any change in local U.S. address within 10 days of a move.

Health Insurance

- Health Insurance is mandatory and visiting scholar must have health insurance during his/her stay at CSUSB. (Health Insurance is a requirement for the J-1 visa by the Department of Homeland Security. If you do not have health insurance upon arrival to CSUSB you must purchase health insurance that we provide.)

Changes in Program

- Visiting Scholars will notify the CISP office of any proposed changes in the terms and conditions of the scholar's exchange program, including changes of department, position duties/topic of research, compensation, location of activities or dates of program.

Bringing your Dependents and Duration of Stay at CSUSB

- Visiting Scholars must get approval from the faculty director, Dr. Chuang, to bring dependents to the U.S. Under FAM 642.85 scholars and/or their dependents are allowed to be at CSUSB only for one year. Please see the Family Information section for more information.
http://senate.csusb.edu/FAM/Policy/%28Admin%29Visiting_Professor.pdf

Notice of Departure

- Notify CISP of your departure at the completion of the program, or if you plan to depart before the program end date. Once your program at CSUSB is over you must return to your home country and to your institution. Failure to report to your university/institution upon return to home country may jeopardize other visiting scholars from coming to CSUSB.

I hereby certify that I have read the above mentioned in this agreement. As a CSUSB J-1 visiting scholar I must take care of my stay in the US to maintain lawful J-1 status, failure to do so can have serious short-term and long-term consequences. Termination has an adverse effect on the exchange visitor's status and may jeopardize future re-entry into the U.S. CSUSB can terminate my J-1 visitor status if I fail to maintain the above mention in this agreement.

Visiting Scholar

Signature

Date