**REQUEST FOR SPONSORSHIP OF A VISITING SCHOLAR OR SPECIALIST**

**(Request for DS-2019 Form in order to apply for J-1 Status)**

In order to submit a J-1 Visa request, the sponsoring department must first have secured either a teaching or a research appointment at Barnard for the Visiting Scholar or Specialist.

Research appointments must be reviewed and approved by the President’s Advisory Committee on Appointments, Tenure, and Promotion (ATP). The procedure for requesting a research appointment as a Visiting Scholar is available [here](https://portal.barnard.edu/sites/default/files/2021-08/Procedures%20for%20Requesting%20Research%20Scholar%20Appointments%202017.pdf) (note: this is a pdf download – check your download folder once you’ve clicked the link). The following documentation will be required for a research appointment:

* A letter of support from the department chair, which includes a description of the anticipated benefits of the association, the scholarly research to be conducted, and the specific term of the appointment
* The candidate’s current *curriculum vitae*

Research Scholar requests should be submitted to Christopher Barthel, Associate Provost for Faculty Affairs, 110 Milbank Hall (cbarthel@barnard.edu, 212-854-8365) no later than **October 1** for appointments commencing the following spring and **March 1** for appointments commencing the following fall.

Once the appointment/hire has been approved, please submit the following documentation to Giorgio DiMauro, Associate Provost for International Initiatives & Special Projects, Office of the Provost (gdimauro@barnard.edu, 212-854-7430):

* The completed form below with sponsoring faculty’s signature
* Barnard appointment/hire letter
* A copy of the information page of the visiting scholar’s passport
* If funding is not included in the Barnard appointment letter, a letter of financial support from the visiting scholar’s funding institution or proof of private funds from a bank at a minimum of $2,500 a month for one individual

**Important notes:**

* The stay of a J-1 exchange visitor coming to the United States as Professor or Research Scholar is **limited to** **five (5) years**, including any previous continuous time spent at another institution under J-1 status.
* If you wish to sponsor a J-1 exchange visitor for longer than six (6) months, and if the visitor has held J-1 or J-2 status at any other institution for longer than six (6) months in the past year, there is a **bar on repeat participation**. Please consult with the Associate Provost for International Initiatives.
* Under certain circumstances, J-1 scholars may be subject to a **two-year home residency requirement** upon completion of the J-1 program: 1) if the scholar is directly receiving US or home government funding, 2) if the scholar’s area of expertise appears on the home country’s [skills list](https://travel.state.gov/content/travel/en/us-visas/study/exchange/waiver-of-the-exchange-visitor/exchange-visitor-skills-list.html), or 3) the scholar is receiving graduate medical training.
* U.S. immigration law prohibits J-1 sponsorship for appointments to tenured or tenurable positions.
1. **INFORMATION REGARDING SPONSORING DEPARTMENT**

Barnard College Department:

Name of Sponsoring Faculty Member:

Signature of Sponsoring Faculty Member:

1. **INFORMATION REGARDING STAY OF VISITING SCHOLAR/SPECIALIST**

Category of visiting scholar:

 Short-Term Scholar (for brief visits such as lecturing, consulting, training; no minimum and a 6-month maximum for stay)

 Research Scholar (for longer visits focused on conducting research; minimum of 3 weeks and a maximum of 5 years)

 Professor (for longer visits focusing on teaching, lecturing, consulting, and conducting research; minimum of 3 weeks and a maximum of 5 years)

Length of stay (proof of funds for stay must be provided): \_\_\_\_\_\_

Commencing: Ending:

 (Month/day/year) (Month/day/year)

1. **INFORMATION ON VISITING SCHOLAR/SPECIALIST**
2. Full name: \_\_\_\_\_\_\_\_\_\_\_

 (Family Name) (First Name) (Middle Name)

1.  Male  Female  Other
2. Current mailing address:
3. Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Date & Place of Birth:

 MONTH/Day/Year City Country

1.  Single  Married

If married, will spouse accompany scholar and need J-2 status?

 No  Yes\* *If yes, please fill out J-2 Dependent information section below.*

Will children accompany scholar and need J-2 status?
 No  Yes\* *If yes please fill out J-2 Dependent information section below.*

1. Country of citizenship:

1. Country of legal permanent residence:
2. Highest degree obtained: In what field?
3. Current occupation in home country:

 (If undergraduate or graduate student, note here.)

1. Current employer in home country, if applicable: \_\_\_\_\_\_
2. Confirmation of candidate’s English language proficiency (please select the method of

assessment used):

Official results of a recognized English language test (e.g., TOEFL, IELTS)

Signed documentation from an academic institution or English language school

An interview by the faculty sponsor, either in-person or by videoconferencing

1. Has candidate previously visited Barnard College?  No  Yes

If yes, when and on which visa type(s):

1. If candidate has ever been in J-1 status in the U.S., please list the dates and purpose of stay:
2. If candidate is already in the U.S. please provide the following supplemental information and materials:
3. Current visa status (e.g., B-1, F-1, J-1):
4. If currently on a J-1 visa and transferring to Barnard College, photocopy of all DS-2019 forms related to current J-1 program
5. **FINANCIAL SUPPORT FROM ALL SOURCES WHILE IN U.S. AT BARNARD COLLEGE**

**Please note:**

* Amounts must be confirmed in U.S. dollars.
* Appointees should be given or prepare to have a minimum of $2,500/month, and $800/month for an accompanying spouse and $400/month for each accompanying child, if they are receiving health insurance through Barnard College, plus the cost of health insurance if they are not receiving health insurance.
* For a scholar/specialist who is being funded by sources *outside of Barnard College:* provide current documents indicating financial sources, in U.S. dollar amounts. These can be scholarship letters, bank letters, and bank statements.

LIST BELOW ALL SOURCES OF SUPPORT AND INDICATE AMOUNTS:

* **Barnard College:** USD$ per

 (Amount) (Period)

(Note: This option refers onlytofunds paid directly to scholar/specialist by Barnard College and not to funds available through faculty member’s budget).

 Does this funding include health insurance for scholar/specialist?  YES  NO

 Does this funding include health insurance for dependents of scholar?  YES  NO

* **US Government Agency(ies): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

[Note: funding from government agencies for Research Scholars and Professors makes them subject to the 2-year home residency requirement upon completion of the J-1 program]

USD$ per

(Amount) (Period)

 Does this funding include health insurance for scholar/specialist?  YES  NO

 Does this funding include health insurance for dependents of scholar?  YES  NO

* **The Scholar’s/Specialist’s Government: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

[Note: funding from government agencies for Research Scholars and Professors makes them subject to the 2-year home residency requirement upon completion of the J-1 program]

USD$ per

 (Amount) (Period)

 Does this funding include health insurance for scholar/specialist?  YES  NO

 Does this funding include health insurance for dependents of scholar?  YES  NO

* **Other Organizations:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Note: funding from certain international organizations and organizations affiliated with government agencies may make Research Scholars and Professors subject to the 2-year home residency requirement upon completion of the J-1 program]

USD$ per

 (Amount) (Period)

Does this funding include health insurance for scholar/specialist?  YES  NO

Does this funding include health insurance for dependents of scholar?  YES  NO

* **Scholar’s/Specialist’s Personal Funds:** USD$ per

 (Amount) (Period)

[Please provide a bank letter/statement]

1. **J-2 DEPENDENT INFORMATION (if relevant)**

If a scholar or specialist with J-1 status is married and/or has unmarried children under 21 years of age, the spouse and children are eligible to join the exchange scholar/specialist under J-2 status. If J‑2 status is being requested for a spouse or children, please provide the information below:

*Spouse information*

1. Name:  Male  Female  Other

 (As it appears in passport:) Last First Middle

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_

MONTH/day/year City Country

Country of Citizenship: \_\_\_\_\_\_\_\_

Country of legal permanent residence: \_\_\_\_\_\_\_\_\_\_\_\_\_

*Child 1 information*

1. Name:  Male  Female  Other

 (As it appears in passport:) Last First Middle

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_

MONTH/day/year City Country

Country of Citizenship: \_\_\_\_\_\_\_\_

Country of legal permanent residence: \_\_\_\_\_\_\_\_\_\_\_\_\_

*Child 2 information*

1. Name:  Male  Female  Other

 (As it appears in passport:) Last First Middle

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_

MONTH/day/year City Country

Country of Citizenship: \_\_\_\_\_\_\_\_

Country of legal permanent residence: \_\_\_\_\_\_\_\_\_\_\_\_\_

*Child 3 information*

1. Name:  Male  Female  Other

 (As it appears in passport:) Last First Middle

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_

MONTH/day/year City Country

Country of Citizenship: \_\_\_\_\_\_\_\_

Country of legal permanent residence: \_\_\_\_\_\_\_\_\_\_\_\_\_