

J-1 SUMMER TRAVEL/WORK PROGRAM

Guidelines

Academic departments wishing to invite university international students to come to the United States to engage in summer employment must abide by the Department of State guidelines for this purpose. Under our current designation, UK receives a maximum of 30 participants per year. International Student & Scholar Services (ISSS) charges a fee of **\$59** for processing a *DS-2019 Certificate of Eligibility for Exchange Visitor Status* for a J-1 Summer Work/Travel participant. Note: Fees cannot be charged to grants. The request form for a DS-2019 is on page 2.

Below are the provisions, which must be fulfilled before the DS-2019 can be issued to enable student participants to apply to the American Consulate in their home countries for a J-1 visa:

1. Participants must be full-time students enrolled in courses and actively pursuing an academic degree at an accredited college or university abroad. Final-year students are eligible. (These are current students when they applied for participation even if they will have graduated at the time of participation in the SWT program.)
2. Duration of employment may not exceed 4 months, and must take place during the *participants'* summer vacation. Extension of program is not permitted.
3. Living accommodations must have been secured for student participants before arrival.
4. The rate of pay must be sufficient for room, board, and other living expenses. The minimum at UK is \$1,500 per month.
5. Academic departments must make available for student participants a 24-hour telephone number to access in emergency situations.
6. If there is a formal agreement between UK and an institution abroad, a copy of the agreement should be submitted, along with the names and addresses of the UK students going abroad.
7. All participants must carry health insurance, which meets State Department requirements. When the form DS-2019 is issued, ISSS will send information regarding these requirements.

Health Insurance Requirement: J-1 Exchange Visitors must carry health insurance with a reputable company during the period of time they are participating in the Exchange Visitor program. Exchange Visitors do not need to obtain their insurance prior to arrival at the University of Kentucky; however, they must have funds available to purchase it after their arrival on campus either through a check or credit card. Cash is not accepted.

- Minimum coverage shall provide repatriation of remains in the amount of \$7,500;
- expenses associated with medical evacuation of Exchange Visitors to their home country (\$10,000);
- 80% of covered medical expenses paid by insurance company medical benefits at least \$200,000 per accident or illness;
- A deductible not to exceed \$500 per accident or illness; and
- Coverage for perils inherent to the activities of the exchange program in which the Exchange Visitor participates.
- Maternity benefits
- Outpatient surgery \$10,000

DS-2019 Request for Summer Work/Travel

Please complete this form and submit it to the J-1 Advisor with the following documentation: **1) candidate's curriculum vitae, 2) copy of the offer letter, and 3) passport biographical page.**

J-1 Advisor:

Marc K. Invergo, 205 Bradley Hall, Campus 0058

PH: 257-4067 Ext 240 FAX: 323-1026 E-MAIL: marc.invergo@uky.edu

Today's date: _____ JV/Cost Center Account #: _____

Statistical Order Number (if Applicable): _____

Family name (exactly as reflected on passport): _____

First: _____ Middle: _____

Gender: _____ M _____ F Date of birth (mm/dd/yyyy): _____

Home address: _____

City of birth: _____ Country of birth: _____

Country of citizenship: _____

Country of legal permanent residence: _____

Name of university student is now attending: _____

Academic standing: Undergraduate: _____ Graduate: _____

Address of U.S. Living accommodations: _____

Stay at UK must not exceed four months and must take place during participant's summer vacation. Extension of stay is not permitted. Beginning (mm/dd/yyyy): _____ Ending (mm/dd/yyyy): _____

Inviting department: _____

Dept address: _____

Department contact person: _____

E-mail: _____ Phone: _____

Individual in UK department with 24-hour telephone number to access in emergency situations:

Name

Phone number