

**APPLICATION FOR ACADEMIC TRAINING  
J-1 EXCHANGE VISITOR – North Dakota State University**

**SECTION 1: To be completed by Student**

Name \_\_\_\_\_ ID#: \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone (home): \_\_\_\_\_ Telephone (cell/mobile): \_\_\_\_\_

Email (NDSU): \_\_\_\_\_ Email (personal): \_\_\_\_\_

Major: \_\_\_\_\_

Level of study:  Undergraduate  Graduate Anticipated program end date: \_\_\_\_\_

Your Home Institution: \_\_\_\_\_

If you are a graduate student who is not graduating yet, have you completed all your coursework?  
 Yes  No

If you are an undergraduate student, are you a participant in an NDSU exchange or affiliate program?  
 Yes  No

**Description of Training Program**

Name of Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Name of supervisor: \_\_\_\_\_ Supervisor Telephone: \_\_\_\_\_

Supervisor Email: \_\_\_\_\_ Number of hours/week: \_\_\_\_\_

Dates of Training Start date: \_\_\_\_\_ End date: \_\_\_\_\_

*\*Please note: Students on J-1 Academic Training are required by the U.S. Department of State and NDSU to continue to have the NDSU health insurance for the duration of the training program, including the 30 day grace period at the end. If you are conducting your academic training after your studies area done, you will be required to show official financial documentation as part of the application, showing you have the funds available for the duration of your academic training assignment (including housing, meals, and health insurance).*

**What are your job responsibilities?**

\_\_\_\_\_  
\_\_\_\_\_

**What are your goals in undertaking this training program?**

\_\_\_\_\_  
\_\_\_\_\_

**How does this training relate to your field of study?**

\_\_\_\_\_  
\_\_\_\_\_

*I hereby apply for a period of academic training related to my J-1 nonimmigrant status. I understand that if it is granted, I am responsible for maintaining my valid J-1 status, including keeping the dates on my DS-2019 current and maintaining the health insurance that is required by law for me (and any J-2 dependents). I will notify the Office of International Student and Study Abroad Services immediately if I should move, or if my training ends prior to the date listed above. I understand that this permission for training is valid only for the employer given above, and should I wish to undertake training with any other company that I must receive prior permission to do so.*

Signature of student \_\_\_\_\_ Date \_\_\_\_\_

**SECTION 2: Submit this page to your Academic Advisor or your Academic Department at NDSU.**

→ Provide the department a copy of your employment offer letter (and relevant training or orientation materials) so that the department contact is familiar with your educational background and the training you are requesting.

**Academic Advisor and/or Academic Departmental Approval for Academic Training for International Students in J-1 "Exchange Visitor" Visa Status**

The immigration regulations governing the J-1 Exchange Visitor Program allow the program sponsor (NDSU) to issue employment permission for academic training related to a student's field of study (22 CFR § 62.23(f)(5)). Appropriate activities vary over disciplines and academic level. For example, postdoctoral training in biochemistry might consist of paid research at one location with one faculty advisor, whereas academic training in music may involve a number of paid or unpaid teaching or performance opportunities. In general, academic training usually involves only one position and employer, but may involve simultaneous activities, either paid or unpaid, with one or several employers. It can be done during the semester or after the student's J-1 program at NDSU is finished, and it is available to both non-degree and degree-seeking students. The regulations require the student's academic department to justify that the position is considered related to the student's field of study. The student will be informed by our office of the limitations on hours per week to be worked and duration of the training, depending on their particular situation. This is also an opportunity to become familiar with the student and their educational background as you assess if this training opportunity is related to their field.

**The Office of International Programs authorizes the academic training by way of extension of the J-1 student's immigration document after verifying the following: (a) the student is in good academic standing and (b) that the academic training sought is directly related to the student's major field of study. Thank you for completing the form below. Please return it to the student or submit it to the Office of International Student and Study Abroad Services, Memorial Union 116.**

\_\_\_\_\_  
**Student Name**

\_\_\_\_\_  
**Student ID**

\_\_\_\_\_  
**Site of Academic Training** (Name and address of institution/business, etc.)

\_\_\_\_\_  
**Name of Training Supervisor**

\_\_\_\_\_  
**Number of Hours per Week**

\_\_\_\_\_  
**Training Dates**

*After visiting with student, please write a brief description of training goals or objectives (For example: Research in biochemistry, internship in marketing, training in music, etc.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**In accordance with the academic training regulations described under 22 CFR 62.23(f)(5), as the student's academic advisor or department chair, I attest that:**

*\*the above referenced student is in good academic standing*

*\*this academic training experience is related to the student's field of study*

*\*this academic training experience is an integral or critical part of the student's program of study*

**I recommend that you authorize this student to participate in academic training. My signature confirms that the information in the student's application and on this form is true, and that details of this academic training experience will be available upon request to the Exchange Visitor Program administered by the US Department of State and the US Department of Homeland Security.**

\_\_\_\_\_  
**Printed Name (Advisor or Dept. Chair)**

\_\_\_\_\_  
**Signature and Date**

❖**FINAL STEP:** Please submit pages 1, 2, and 3 to your J-1 International Student Advisor, along with a copy of your official offer letter for the employment. *The offer letter may be a photocopy but must be on official employer letterhead paper and must list the terms and conditions of your employment, including job title, length of employment, and salary/pay.*

**SECTION 3: Evaluation by the J-1 Responsible Officer**

I have determined that the academic training being requested:  
 is  is not warranted under federal regulations.

The criteria and time limitations set forth in 22 CFR 62.23 (f) (3) and (4)  
 are  are not satisfied.

In order to ensure the quality of the academic training program, I hereby evaluate the effectiveness and appropriateness of the academic training in achieving the state goals and objectives as  
 satisfactory.  unsatisfactory.

Signature of Responsible Officer \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

**FOR OFFICE USE ONLY:**

**Advisor checklist**

- Page 2 received (Departmental approval form)
- Funding verified (if training to be completed after program end)
- Authorized employment in SEVIS and printed new DS-2019
- Entered extension on spreadsheet
- Academic Training letter written for employer
- Health insurance billed and requested (if applicable)