To: Academic Departments & Exchange Visitors

From: ISO Alternate Responsible Officers

Re: J-1 EXCHANGE VISITOR PROGRAM

Thank you for your interest and inquiry regarding the J-1 (Exchange Visitor) Program at Hunter College. The International Students Office (ISO) assists prospective international students obtain the J-1 Exchange Visitors Visa for the purpose of entering the U.S. to enroll in a short term program at Hunter College.

Enclosed you will find the DS-2019 Request Form for the Certificate of Eligibility needed to request the J-1 Visa. Please follow the instructions for completing the form and submitting the supporting documents very carefully. As indicated, the form must be approved by the Academic Department Chairperson before the request for form DS-2019 can be processed in the ISO.

For additional information or questions about the J-1 issuance process, please contact the International Students Office at intlss@hunter.cuny.edu.

The two links below provide detailed information about the J-1 Exchange Visitor Program, as well as the mandatory health insurance requirements.

https://travel.state.gov/content/travel/en/us-visas/study/exchange.html

Revised 09-25-2023-Effective Spring 2024

International Students Office: 695 Park Avenue, Room 1109/1133E; New York, NY 10065
212-772-4864: Email: intlss@hunter.cuny.edu – Website: www.hunter.cuny.edu/studentservices/is
Information and Procedure for Applying for
For J-1 (Exchange Visitor) Status

J-1 Exchange Visitor Program

The J-1 Exchange Visitor Program offers various options to individuals who wish to come to the United States to participate in a particular educational or cultural program. The “student” category allows eligible applicants to request the J-1 visa for the purpose of enrolling in an academic program at a U.S. accredited institution of higher learning.

Hunter College Academic Departments andProspective Exchange Visitors

All J-1 applicants must be officially accepted by Hunter College in a degree or non-degree program of study. The academic department and prospective student must then contact the International Students Office (ISO) to request form DS-2019 (Certificate of Eligibility for J-1 Status).

Procedures to Follow:

I. In order to receive form DS-2019, the ISO must receive the following documents:

1. Exchange Visitor DS-2019 Request Form signed by the faculty host and Department Chair
2. Copy of acceptance letter from the Education Abroad Office
3. Copy of exchange visitor’s transcript from school abroad
4. Financial documentation which shows how the prospective student will meet his/her educational and living expenses in the U.S.
5. Proof of health/medical insurance for the period student will remain in the U.S.

II. Academic departments/prospective students must return the completed DS-2019 and supporting documents to the International Students Office at the address listed below.

III. Once the DS-2019 request has been received in the ISO, please allow up to 5 business days for processing. Effective fall 2023, DS2019 forms shall be sent to students via email. NOTE: Visa processing times vary at the consular issuing posts abroad. Therefore, departments should anticipate that a prospective student may need a minimum of 6 weeks to report to the school campus.

III. All exchange visitors (students) admitted to the U.S. are required to attend an orientation meeting, where they will receive information about the school’s academic requirements, cross-cultural issues and the available support services. If they have not yet signed up for orientation online, students can report to the ISO with their immigration documents (DS-2019, passport, current address) to receive assistance.
Estimate of Living Expenses for Exchange Visitors and their Dependents

Provided below is an estimate of the living expenses for an exchange visitor (student) and for his/her dependents. Students who plan to bring their spouse and/or children will be required to show they have sufficient funds to cover the additional living expenses. In order to be issued the J-2 status, the student’s dependents must also fill out a visa application and be able to prove their relationship to the primary visa holder.

**Expenses for Exchange Visitor:**

a) $2,600 per month

b) $31,200 per academic year

**Expenses for Dependent (Spouse):**

a) $8,000 per academic year

**Expenses for Dependent (Child):**

a) $5,000 per academic year

Health Insurance

Exchange visitors are required to have medical insurance that is ‘active’ for themselves and their dependents during the period they remain in J-1/J-2 status in the United States. At the minimum, the insurance must cover the following:

- **Medical benefits of at least $100,000 (U.S. dollars) for each person, per accident or illness**
- **Repatriation of remains in the amount of $25,000 (U.S. dollars)**
- **Expenses coverage for medical evacuation in the amount of $50,000 (U.S. dollars)**

**Note:** The health insurance plan cannot have a deductible that exceeds $500, and must also meet other requirements specified in the U.S. Exchange Visitor Program regulations: 22CFR Part 62.14.

Documentation of Funding

All requests for the form DS-2019 must be accompanied by proof of support. The letters/statements must include the current date, the exchange visitor’s name, the specific dollar amount to be provided, as well as the beginning and ending dates of the sponsorship. Additionally, all statements showing proof of available funds must be typed on official letterhead and indicate that the sponsorship will be for the exchange visitor’s program of study at Hunter College. Sponsors must sign each statement of support. Letters that do not meet these requirements cannot be accepted and may delay the processing of form DS-2019. Documentation of funding must be translated into English and all currencies converted into U.S. dollars.

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212-772-4864; Email: intfs@hunter.cuny.edu – Website: www.hunter.cuny.edu/studentservices/is
Request for Form DS-2019  
(Certificate of Eligibility for J-1 Exchange Visitor Status)

Instructions for Academic Departments & Exchange Visitors: Please type or print clearly the information requested below and return the form with all supporting documents to the International Students Office. If you are assisting a student complete this form, please be sure that the information requested in the Exchange Visitors part is current and accurate.

Date: _______________________

I. DEPARTMENT INFORMATION:

Name of Faculty/Department Member Making Request ________________________________

Title ________________________________

Department/Campus Location ________________________________

Contact Person ________________________________

Telephone/Extension ________________________________

II. EXCHANGE VISITOR’S INFORMATION:

Name (as it appears on passport): ____________________________________________

Last ______________ First Name ______________ Middle ______________

Gender: () M () F ()X Date of Birth: _____/_____/_____ Email: ________________________________

Place of Birth ________________________________ Citizen of ________________________________ Permanent Resident of ________________________________ (if applicable)

City ____________________________ Country ________________________________

Address in your country: ____________________________________________

Purpose of Request is to: ( ) Begin New Program ( ) Extend Current Program ( ) Program Transfer

Position in Home Country (university student, etc.) ________________________________

This study request form will cover period from (Month/Day/Year): _____/_____/______ to _____/_____/______

Category: ( ) Student ( ) Other (please specify) ________________________________

Field of Study: ________________________________

I plan to start classes at Hunter College on _____/_____/20____ - spring, summer or fall and end on ____/_____/______ spring, summer or fall

Exchange Visitor’s U.S. address (if known): ________________________________

Name of Street ________________________________

City ________________________________ State __________________ Zip Code __________________

III. EXCHANGE VISITOR’S DEPENDENTS: This exchange visitor will

( ) Not be accompanied by dependents during his/her Hunter College

program ( ) Be accompanied by _____ dependents upon arrival to Hunter

College

( ) Come alone and later be joined by dependents

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212-772-4864: Email: intiss@hunter.cuny.edu – Website: www.hunter.cuny.edu/studentservices/is
J-1 (Exchange Student) Proof of Financial Sponsorship

This form is for sponsors who will provide financial support to the exchange student requesting a J-1 Visa. It must be completed and signed by the person(s) who will provide the student with full or partial financial support. **PLEASE NOTE: Sponsors who will use their personal savings as part of their support must provide an official bank letter, preferably in English, showing the current balance in U.S. dollars.**

**SPONSOR #1**

I, ______________________________ citizen of ______________________________ and ______________________________ citizen of ______________________________ and

(Name of sponsor) (Country)

residing at ______________________________

(Street name and number) City/State or Country Postal code
certify that I plan to provide ______________________________, who is my ______________________________, a total of $ ______________________________ to help meet his/her educational and living expenses in the United States until ______________________________. Proof of my funds in U.S. dollars are attached. ______________________________

date ______________________________ (Your Signature)

SPONSOR #2 (Including foreign institution or government if applicable) will provide part or all of financial support

I/We, ______________________________ citizen of ______________________________ and ______________________________ citizen of ______________________________ and

(Name of sponsor) (Country)

residing at ______________________________

(Street name and number) City/State or Country Postal code
certify that I plan to provide ______________________________, who is my ______________________________, a total of $ ______________________________ to help meet his/her educational and living expenses in the United States until ______________________________. Proof of my funds in U.S. dollars is attached. ______________________________

date ______________________________ (Your Signature)
ACKNOWLEDGMENT REGARDING PROTECTION OF PERSONAL DATA (FOR EXCHANGE VISITORS FROM THE EU COUNTRIES)

Overview. This Acknowledgment form is required in conjunction with the CUNY APPLICATION FOR THE IMMIGRATION CERTIFICATE OF ELIGIBILITY you must complete to be issued the SEVIS DS-2019 Form. You are coming from a country subject to the General Data Protection Regulation (GDPR) adopted in the European Union (EU), which provides certain protections and rights with respect to your personal data. This data, which you will provide is necessary in order for Hunter College of the City University of New York that has accepted you to participate in their academic program, conduct research or teach, to populate your information in SEVIS and to issue you the DS-2019 Form. The SEVIS form is required for your visa application at the American Embassy or Consulate in your country of residence; and the SEVIS form will be your official proof of legal immigration status in the U.S.

General Principles. The personal data provided to CUNY or to third parties acting on CUNY’s behalf will be handled in accordance with applicable law, our policies and the policies and principles of the GDPR applicable while you are in the EU. Your personal data will be processed and collected only for purposes related to your academic enrollment, research, or teaching at Hunter College of the City University of New York, and the SEVIS DS-2019 Form. Access will be limited to persons requiring such information in order to provide required services and other benefits offered by the college, or to third parties acting on CUNY’s behalf. Your data will be kept only so long as is necessary or required by policy and law. We will maintain and process your data in a manner that assures its security and confidentiality.

Rights. Under GDPR, you have certain rights with respect to your personal data, including, among other rights, the right of access to your data; the right to correct inaccuracies in your data; the right to withdraw your acknowledgement; and the right to delete personal data if the collection of that data is no longer necessary to the purpose for which it was collected. The full text of the GDPR can be found at https://gdpr-info.eu

Data Controller. Under GDPR, a Data Controller is the person or entity responsible for overseeing the processing of your data. For purposes of your participation in an academic program, conduct research, or teach at our institution, the Data Controller is Hunter College of the City University of New York.

Sensitive Data. Data concerning your physical or mental health will be processed only for the purposes of protecting your safety or the safety of others, providing necessary healthcare, responding to an emergency, or complying with any applicable mandatory provision of law. Sensitive data may be communicated, in compliance with the principles above, to bodies and authorities, both public and private (such as hospitals, police offices, courts, security supervisors, insurance companies) only for the purposes relating to health and safety emergency and for the purposes of fulfilling obligations set forth by law.

I hereby acknowledge the use of my personal data in accordance with the provisions outlined above.

Date: ___________ / ___________ / ___________  
Signature: ____________________________

Print Full Name: ____________________________