

J-1 Student Intern Request Form - Applicants

This session is to be completed by the Student Intern

Process of Becoming a J-1 Student Intern at The Chicago School:

1. Submit application and all supporting documents to the Chicago School academic department.
2. Provide copies of passport biographical pages for you and any accompanying dependents.
3. Submit original financial documents. The Global Engagement will not return them to you. Note: Original financial documents are also required for your U.S. visa application at the U.S. embassy or consulate. Current funding requirements per month: \$1,250 for Exchange Visitor; \$500 for first dependent, \$365 for each additional dependent.
4. Submit the completed "Certification of Academic Status" (See page 3). This is to be completed by your home university.
5. Form DS-7002: Download from: <http://www.state.gov/documents/organization/84240.pdf>.
 - Complete, Section 1: Participant Information except for "If Professional, Number of Years of Experience in the Field." This is for "Trainees."
 - Complete, "Type of Degree or Certificate" with the anticipated degree/certificate.
 - Complete, "Date Awarded (mm-dd-yyyy) or Expected" with the anticipated date of degree/certificate completion.
 - Sign the form in Section 3: Contract Agreement.
 - Submit a copy to the Chicago School academic department.
6. The Chicago School academic department will accept or reject your Internship Application.
7. If the academic department accepts your application, they will forward all of your forms and information to GLOBAL ENGAGEMENT.
8. If all documents are in order, GLOBAL ENGAGEMENT will create a Form DS-2019 for you (and your dependents, if applicable). Your department will mail you the DS-2019 immigration form(s), along with other documents you need to apply for your J-1 visa at a U.S. consulate or embassy outside of the U.S.
9. All initial J-1 visa applicants must pay the SEVIS fee before applying for a U.S. visa. SEVIS fee information can be found at: <http://www.fmjfee.com>. You cannot pay this fee until you have received the DS-2019 from The Chicago School.
10. Prior to entry into the U.S., obtain the health insurance coverage required by U.S. immigration law. Please contact GLOBAL ENGAGEMENT for insurance information.

Intern Biographical Information:

****Enter all names as they appear in your passport***

Family Name/Surname: _____ First/Given Name: _____ Middle Name: _____
 Male Female Date of Birth: Month: _____ Day: _____ Year: _____
Country of Birth: _____ City of Birth: _____
Country of Legal Permanent Residence: _____ Country of Citizenship: _____
Home Country Address: Street, House Number, Apt.: _____
City: _____ State: _____ Postal Code: _____
Email Address: _____

Dependent Information:

- Only include dependents who will accompany you to the U.S.
- Dependents are defined as your spouse or unmarried children under 21 (not parents)
- Do not include dependents who are U.S. citizens
- Attach additional sheet if necessary

Name (Family, Given name)	Relationship	Birth Date: MM/DD/YY	City of Birth	Country of Birth	Country of Legal Permanent Residence	Country of Citizenship

Health Insurance Requirement:

U.S. immigration law requires J-1 Interns and their J-2 dependents to carry health insurance for the entire period of their program. Health insurance is part of your legal immigration status.

Health insurance coverage *must* meet specific U.S. Department of State Exchange Visitor requirements. For additional information, Contact GLOBAL ENGAGEMENT

Upon arrival at The Chicago School, you *must* present to GLOBAL ENGAGEMENT:

1. Proof of health insurance AND
2. Information about the health insurance policy to show it meets immigration requirements.

Intern Certification:

- I will check-in with the Global Engagement upon arrival at The Chicago School (bring your immigration documents and insurance proof at check-in).
- I will attend the **required** Global Engagement New International Exchange Visitor Orientation after I arrive at The Chicago School.
- I will fully comply with all U.S. immigration law and regulations, including insurance requirements. I realize that failure to maintain legal status will result in **immediate program termination**.
- I attest that this internship fulfills the educational objectives of my current degree program at my home institution.
- I will return to the academic program at my institution in my home country to fulfill and obtain a degree after completion of this J-1 internship program at The Chicago School.
- I will be evaluated by my internship supervisor at the end of the internship program. If the internship is longer than six months, I will also be evaluated at the mid-point of the internship program.
- I understand that the internship program cannot last longer than 12 months in duration.
- I understand that employment outside of my specific program activity is illegal.
- I understand that any activity that is NOT part of my internship is **restricted**. I will obtain approval from my department and from Global Engagement before I participate in any academic or professional activity that is not part of my program.
- I understand that several restrictions apply to the J-1 Exchange Visitor status, including but not limited restrictions on length of program, repeat participation, and return to country of residence.
- I understand that I can only enter the U.S. up to 30 days prior to my start date. I also understand that if I fail to check-in with THE GLOBAL ENGAGEMENT within **30 days after my start date** that I will be

terminated from my program. I will notify my academic department immediately if I anticipate delays to my program start date so that GLOBAL ENGAGEMENT can defer the program start date.

- After arrival, I will notify GLOBAL ENGAGEMENT of all U.S. residential address changes within 10 days of my move for the duration of my program. I understand that address notification is required my U.S. immigration law.

Statement of Release: I understand that immigration regulations are subject to change, and ultimately it is my responsibility to be aware of such changes. I further understand that any misrepresentation of information or document fraud may affect my J-1 Exchange Program at The Chicago School. Lastly, I hereby authorize The Chicago School to disclose copies of certain documents related to my immigration status to federal agencies if requested to maintain compliance.

Signature of Exchange Visitor: _____ Date: _____
Print Name: _____

Certification of Academic Status:

This form should be completed by the highest appropriate academic official for the applicant seeking a student internship at The Chicago School. You may place this form in a sealed envelope to ensure privacy, if you choose.

Student Intern Name:

Family Name/Surname: _____ First/Given Name: _____ Middle: _____

Student is currently enrolled at (Name of Institution): _____

Mail address of institution

Major Field of Study: _____ Degree Sought: _____

Anticipated Dates of the Internship: From _____ To _____
Month/Day/Year Month/Day/Year

The Chicago School Academic Department Hosting the Intern:

How will this internship program fulfill the educational objectives of the student's current degree program?

I hereby certify the following information for the above listed student:

1. The information provided on this form is accurate;
2. The student is enrolled at and is pursuing a post-secondary degree at this institution;
3. The student is in good academic standing (e.g. not under "suspension" or "probation");
4. The student has the appropriate educational background to participate in the internship program;
5. The internship will fulfill the educational objectives of the student's course of study;
6. The internship will expose the student to American techniques, methodologies, and technology that will expand upon his or her current knowledge or skills;
7. The student will be returning to this institution to complete his or her studies upon completion of the internship program;
8. There is no objection to the student receiving wages or other remuneration for participating in this program.

Name of the Academic Official (please print)

Title

Telephone Number

Signature

Date

Email Address