W&M Scholar Information Form

(to be completed by scholar/intern and submitted to Reves Center with supporting documents listed in Part F)

Part A: Biographical Information

1.	Name (Name must appear exactly as it is written in the passport)
	(Family/Last Name) (First/Given Name) (Middle Name)
2.	Date of Birth: 3. Gender:MaleFemale
4.	Place of Birth://
5.	Country of Citizenship: 6. Country of Permanent Residence:
7.	Passport Number: 8. Country that issued your passport:
9.	Passport issue date: 10. Passport Expiry Date: (Month) (Day) (Year)
11.	U.S. Social Security Number (if you have one; otherwise leave blank):
12.	Higher education/degrees earned
	Title of degree (e.g. Ph.D) Field (e.g. Biology) Institution Date awarded or expected
	Title of degree (e.g. Ph.D) Field (e.g. Biology) Institution Date awarded
13.	Current Occupation (Job Title) Undergraduate Student Professor Other (Specify)
	Name of institution or employer:
rt B:	Information on this stay and previous stays in the US
14.	Will you be working at or visiting another institution on business during your time in the US? No
	Institution: From: To: Mo Day Year Mo Day Year
	Address: Mo Day Year Mo Day Year Address:
15.	Are you currently in the US? Yes No
	If "Yes", a. What visa status are you currently in? When does your status expire? Mo_Day Year
	b. Do you plan to travel out of the U.S. prior to coming to W&M? Yes No
	i. If yes, what is your expected departure date: Mo Day Year
16.	Have you ever been in the U.S. on a J-1 or J-2 Visa? Yes No

	If "Yes", enter beginning and e	ending dates		and I	DS-2019 category:
[Research Scholar/Professo	r Short term	Stude	nt Specialist	Other (e.g. Au Pair, Intern)
17.	Have you ever been in the US	on an H-1B or I	H-4 Visa? Yes	No	
	If "Yes", enter beginning and e	ending dates		· · · · · · · · · · · · · · · · · · ·	
18.	Please indicate any other stay	s in the US in th	e last 5 years (appro	oximate dates and	visa status):
19.	Did you apply for, or are you in	n the process of,	obtaining US perma	anent residency (g	reencard)? Yes No
	If "Yes", please indicate the sta	atus of your app	lication (check the a	ppropriate option):	
	Labor Certification is per	nding I-130	/I-140 is pending or	approved	485 is pending
Part C:	Address and Mailing Informa	ation_			
	Foreign address				
	_	street address			
		city	state/province	country	postal code
	US address (if applicable)				
		street address			
		city	state/province	country	postal code
	Mailing address (if different from	street	address		
	US or foreign address)				
		city	state/province	country	postal code
	Telephone:		E-mail:		-
Part D	Insurance and Funding Infor	mation (Part D	is only for those bei	ng enoneored for I	-1 etatus: if you are being
	red for H1B, TN, E-3 or O-1 sta			ng sponsored for 3	- I status, ii you are being
family r	insurance for J-1 and J-2 sta members must have health insu \$7,500 for expatriation of rema	rance coverage	that meets minimum	n federal requireme	ents: \$50,000 per accident or
	ing the DS-2019 form and ente				
	have qualifying insurance/wil	I purchase my o	wn insurance prior to	o arrival in the US.	
	will be employed by W&M an	d thus covered I	by the W&M health i	nsurance plan.	

Funding Information for J-1 status

- You must show \$1700 per month of stay. If you will have dependents with you, \$450 per month for each dependent.
- Attach proof of ALL funding sources to be included on the DS-2019; scanned copies are fine
- Documentation for W&M funding may be included in the departmental letter of invitation/contract.
- For personal funds, a recent personal bank statement or employer letter will suffice.

Please list your funding sources:	Amount in US Dollars
W&M (includes grants from external sources)	\$
Personal Funds	\$
U.S. Government (Name of agency):	\$
Foreign Government (Name of agency):	
Organizations (Name of agency):	\$
	organization may trigger the 2 year home residency or purpose of international exchange. For information on this center/issp/visasandimmigration/j1student/residency/index.ph
art E: Dependents (if you have no dependents, skip Pa	ırt E; go on to Part F)
	ovide the following information for each. Please note that per
S immigration law, only your spouse, or unmarried childre	
NOTE: Name must appear exactly as it is writter	in the passport
1. Name: (Family/Last Name) (First/	Given Name) (Middle Name)
Birthdate: Gender:Ma	
City of Birth: Co	ountry of Birth:
Country of Citizenship: (Country of Permanent Residence:
U.S. Social Security Number (if you have one; other	rwise leave blank):
If currently in the US: Current visa status:	Visa status expiration date: (Month) (Day) (Year)
2. Name: (Family/Last Name) (First/	Given Name) (Middle Name)
Birthdate: Gender: Ma	le Female Relationship: Child
City of Birth: Co	ountry of Birth:
Country of Citizenship: (Country of Permanent Residence:
U.S. Social Security Number (if you have one; other	rwise leave blank):
If currently in the US: Current visa status:	Visa status expiration date:

(Month)

(Day)

(Year)

	3. Name:							
	3. Name: (Family/Last Name) (Fire	rst/Given Name)	(Middle I	Name)				
	Birthdate: Gender: Gender:	Male Female	Relationship:	Child				
	City of Birth:	Country of Birth:						
	Country of Citizenship:	Country of Perma	nent Residence:					
	U.S. Social Security Number (if you have one; of	herwise leave blank):		- <u> </u>			
	If currently in the US: Current visa status:	Visa statu	s expiration date:	(A.A (II-)	(D.)	()()		
				(Month)	(Day)	(Year)		
Dart E	: Checklists of required supporting docum	onte						
aiti	. Checking of required supporting docum	ients						
	TN, E-3, and O-1	J-1						
0 0 0	Copy of passport identity page Copy of US visa (if currently in US) Copy of I-94 card (if currently in US) Other evidence of status (e.g. I-20 if currently in Istatus; I-797 if currently in H status, etc) Copy of curriculum vitae	 Copy Copy Other status 	of I-94 card (if cull evidence of statu	(if currently in US) d (if currently in US) of status (e.g. I-20 if currently in F if currently in J status, etc) um vitae				
0	Copy of cumculant vitae Copy of academic credentials (i.e. diploma) (with translation if not in English) Credential evaluation (if you received your degre from an institution outside the US)	o Proof o Stude	ment and good st	e es so provide	e proof o			

Check for \$290 made payable to USCIS for the

For spouse: Copy of marriage certificate (with translation if not in English)

translation if not in English)

filing fee for the I-539 Change of Status Application

- For children: Copy of birth certificate (with translation if not in English)
- For spouse: Copy of marriage certificate (with translation if not in English)
- Check for \$290 made payable to USCIS for the filing fee for the I-539 Change of Status Application

Mailing instructions (email, fax, or hard copies are ok) and Questions:

Steve Sechrist, College of W&M – Reves Center, PO Box 8795, Williamsburg, VA 23187-8795

Email: sjsech@wm.edu Tel. 757 221 3437 Fax 757 221 3597

Note: If you complete this form on a Mac, please print it and scan, fax or mail it.