

# DS-2019 Request Form for J-2s Arriving Separately

University of Hawaii Faculty & Scholar Immigration Services  
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J-1 exchange visitor: \_\_\_\_\_ Start date: \_\_\_\_\_ End date: \_\_\_\_\_

## Please attach:

- UH FSIS [J-1 Information Form](#)
- UH FSIS [J-2 Dependent Information Form](#)
- UH FSIS [Agreement to Oversee J-1 & J-2\(s\)](#)
- Evidence of financial support for J-2s for the *full requested period* (required if J-1's funds do not cover the [minimum requirements](#) for J-2s)
  - Personal funds: Certified bank statement in U.S. dollars (USD).
    - o If the bank statement is not in USD, include a [currency conversion](#) to USD.
    - o If the J-1 and/or J-2(s) (as applicable) are not named as account holders on the bank statement, include a written attestation of support, stating the monthly amount and the intended start and end dates of support, from the person named on the account.
- UH FSIS [J-1 Health Insurance Requirements Compliance Form](#)
- Copy of passport biodata/expiration page(s) for each J-2

## Have any of the dependents ever previously been in J-1 or J-2 status? (See [12-month & 24-month bars](#))

No  Yes - attach DS-2019s from all periods in J-1 or J-2 status & provide the information below:

1. Name: \_\_\_\_\_  J-1 or  J-2? J-1's category: \_\_\_\_\_  
Start & end dates: \_\_\_\_\_ Sponsoring org: \_\_\_\_\_
2. Name: \_\_\_\_\_  J-1 or  J-2? J-1's category: \_\_\_\_\_  
Start & end dates: \_\_\_\_\_ Sponsoring org: \_\_\_\_\_

**\*\*Attach a separate sheet if more space is needed\*\***

PI/Fac Sponsor's signature: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Dept Chair's signature: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

Dean/Dir's signature: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_

AO/PO/Contact: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

FSIS received on: