

Gainesville, FL 32611-3225 Phone: 352-273-1511 Fax: 352-392-6782

Exchange Visitor Registration Form

PLEASE PRINT CLEARLY

Last Name	First Name	Middle Name
Date of Birth (MM/DD/YYYY)	UFID	UF Email Address **
US Address (must be where you live	e NOT a post office box):	
Address:		Apt#:
City:	State:	Postal Code:
Phone Number:	Email Address:	
Emergency Contact (in Home coun	try)	
Name:		
Address:		Apt#:
City:	State:	Postal Code:
Phone Number:	Email (if known):	
Emergency Contact (person to cont	eact in US)	
Name:		
Address:		Apt#:
City:	State:	Postal Code:
Phone Number:	Email (if known):	
I certify that I have	viewed the EVS Online Orie	entation session
Your signature:		Date:
Print Name:		

** (If you do not have a UF email address yet, please provide our office with the address when you obtain it. This address is needed by EVS to communicate with you during your J Program).

Updating your US Address

If and when your US address changes, please notify UF, UFIC, and USCIS by:

- Completing and mailing form AR-11 or submitting electronically at https://egov.uscis.gov/crisgwi/go?action=coa) within 10 days
- Updating your directory profile at www.my.ufl.edu



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I AGREE TO AND FULLY UNDERSTAND THE FOLLOWING REQUIREMENTS:

- 1. I understand it is my responsibility to maintain health insurance for myself and for any J-2 dependents **at all times, no matter what**. EVS is obligated to cancel my visa status and send me home if I allow either my or my J-2 dependents' health insurance to lapse at any time. I also understand that my health insurance must meet at least the minimum requirements for the J-1 program.
- 2. I will notify EVS within 10 days of changing my address. I will also make sure that EVS has my current email address at all times.
- 3. I will immediately notify EVS if anything about my program changes. I understand that failing to notify EVS of any changes to my program **30 days** prior to any change could endanger my J-1 visa status. These changes include, but are not limited to:
 - a. Changing my program dates (leaving early or staying longer),
 - b. Moving to a new department and/or changing my worksite,
 - c. Any changes in funding, or
 - d. Participating in any activities not included in my UF offer letter, including, but not limited to: attending conferences, enrolling in classes, or working/volunteering outside of UF.
- 4. I will notify EVS in advance about trips I will take outside of the United States. I understand that EVS will not authorize my travel unless I have health insurance for myself and any J-2 dependents effective for the full duration of the trip.

I have read and understand the above requirements. I have asked an EVS representative for clarification of any requirement which I did not understand. I understand and will be responsible for the above requirements of maintaining my J-1 visa status.

Signature of J-1 Scholar:	 Date: