

**BIODATA INFORMATION REQUEST FOR FORM DS-2019**  
**Certificate of Eligibility for Exchange Visitor Status, (J-1 Visa)**  
**SPONSORED BY THE UNIVERSITY OF TEXAS**

**PLEASE PRINT OR TYPE**

Please complete this form to request a Certificate of Eligibility for Exchange Visitor Visa (J-1) Status. This form must be completed and signed by the international visitor seeking the Form DS-2019 and returned to the address below for processing.

**Upon receipt of this completed form with required supporting documentation; copy of appointment letter with appropriate administrative approval; and, evidence of sufficient funding for the period of the requested DS-2019, the Office of International Affairs Staff will review all the information provided to determine the eligibility for issuing Form DS-2019.**

Upon confirmation that the Form DS-2019 may be issued, the OIA Staff will prepare and mail the completed Form DS-2019 to the international visitor. International visitors are encouraged to ensure that the all information below is accurate and submitted promptly to OIA with all required documentation to prevent delays in determining eligibility of the Form DS-2019.

**Please note that all supporting documentation must be in English and all copies must be legible. If documentation received is not in English or legible, this will delay determining the eligibility of Form DS-2019.**

1. Name (Must be identical to the name indicated in passport): \_\_\_\_\_ ( ) Male ( ) Female  
Last (Family) First Middle

2. Are you currently in the U.S.? ( ) Yes ( ) No

- If **no**, please mark the No box above and proceed to question #3.
- If **yes**, you **must** provide legible photocopies of all immigration documents issued to you and your dependents (if applicable) since entry into the U.S. and/or in previous periods of stay in the U.S.

3. Have you previously been in the U.S. under a J-1 or J-2 visa status? ( ) Yes ( ) No

- If **no**, please mark the No box above and proceed to question #4.
- If **yes**, you **must** provide legible photocopies of all immigration documents issued to you and your dependents (if applicable) during any period of stay in the U.S. In addition, you **must** provide:
  - A detailed chronological listing of all previous Exchange Visitor periods of authorized stay including dates of J status;
  - Program(s) begin and end date(s);
  - Date(s) of departure from the U.S.;
  - Specify J category(ies)(e.g., Research Scholar, Student, Trainee, etc.); and,
  - Program sponsor's name) and name(s) of training institution(s).

4. Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of Birth: \_\_\_\_\_  
Month/Day/Year City Country

5. Country of Citizenship: \_\_\_\_\_

6. Country of Legal Permanent Residence: \_\_\_\_\_

7. Last Position Held in Country of Legal Permanent Residence:

\_\_\_\_\_  
Position Title or Occupation (e.g. Professor, Instructor, Student, etc)

8. Name of Institution, Agency or University with which affiliated:

\_\_\_\_\_  
9. Source(s) and Amount of Support while in the U.S. Please indicate amount per month in U.S. dollars that will be available to you for the period of anticipated stay in the U.S. A minimum of \$1,500 per month for every month of your estimated stay is mandatory and a minimum of \$2,000 per year per dependent is mandatory (if applicable). Evidence of any funding that will not be provided by The University of Texas must be documented in written form (e.g. bank statements; letters of financial awards, etc). All financial certifications must be provided in English or accompanied by a certified English translation and must be provided in U.S. dollars.

- a. University of Texas \$ \_\_\_\_\_
- b. All other organizations providing support \$ \_\_\_\_\_
  - Name of Organization Providing Funding Must Be Provided: \_\_\_\_\_
- c. Personal funds \$ \_\_\_\_\_
- d. Dependent funds (if applicable) \$ \_\_\_\_\_

10 Name of UT Faculty Member Inviting: \_\_\_\_\_

11. Department Address: \_\_\_\_\_

12. Component (MDA or UTHSC-H or THI): \_\_\_\_\_

13. Will you be accompanied by family who will need J-2 status? ( ) Yes ( ) No

**If yes, complete the dependent information for each dependent who will accompany you in J-2 status. It is critical that you provide accurate information regarding your dependents since inaccurate information would be grounds to deny the J-2 visa.**

**I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THAT ALL INFORMATION PROVIDED ON THIS FORM IS ACCURATE AND THAT ANY FALSE INFORMATION COULD LEAD TO THE REVOCATION OF THE EXCHANGE VISITOR STATUS.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

**RETURN COMPLETED AND SIGNED FORM TO:**  
**Office of International Affairs**  
**P.O. Box 20036**  
**Houston, Texas 77225**  
**Tel: 713/500-3176 Fax: 713/500-3189**  
**Email: [jvisautoia@uth.tmc.edu](mailto:jvisautoia@uth.tmc.edu)**



Children (continued)

**( ) Male ( ) Female**

Name: \_\_\_\_\_  
Last (Family) First Middle

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Month/day/year City Country

Country of Citizenship: \_\_\_\_\_

Country of Legal Permanent Residence: \_\_\_\_\_

**( ) Male ( ) Female**

Name: \_\_\_\_\_  
Last (Family) First Middle

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Month/day/year City Country

Country of Citizenship: \_\_\_\_\_

Country of Legal Permanent Residence: \_\_\_\_\_

**( ) Male ( ) Female**

Name: \_\_\_\_\_  
Last (Family) First Middle

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Month/day/year City Country

Country of Citizenship: \_\_\_\_\_

Country of Legal Permanent Residence: \_\_\_\_\_

**( ) Male ( ) Female**

Name: \_\_\_\_\_  
Last (Family) First Middle

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Month/day/year City Country

Country of Citizenship: \_\_\_\_\_

Country of Legal Permanent Residence: \_\_\_\_\_