

J-1 Scholar Biographical Information Form

Office of International Affairs
University of California, Merced
5200 North Lake Road, Merced, CA 95343
Phone: 209-228-4722
Website: international.ucmerced.edu



BIOGRAPHICAL INFORMATION

Family Name

Given Name

Middle Name

Sex

Male

Female

Date of Birth

City, Country of Birth

Country of Permanent Residence

Country of Citizenship

Permanent Address

Position Title & Employer last held in home country

US VISA HISTORY

If you are currently in the U.S., please indicate your status (answer "N/A" if not in the U.S.).

If yes, will you leave before your program?

Yes, I will leave the U.S. before my J-1 program begins.

No, I will not leave the U.S. before my J-1 program begins.

During the last 24 months, have you been in the U.S.?

Yes, as a B-1 or B-2 visitor.

Yes, in a status other than B-1/B-2 visitor (include documentation).

No, I have not been in the U.S. in the last 24 months.

If you have previously been in J status, have you ever applied for a waiver of the 212(e) 2-year Home Country Residency Requirement?

Yes

No

INFORMATION ABOUT J-1 PROGRAM AT UC MERCED

Position Title

Postdoctoral Scholar

Researcher

Professor

Other

Subject Area

UC Merced Faculty Supervisor

Have you ever worked or studied at UC Merced before?

Yes, I was a student at UC Merced

Yes, I was employed by UC Merced

No

FINANCIAL SUPPORT INFORMATION

*Complete this section if a UC Merced salary will **NOT** be provided, or the salary is less than the minimum required funding.*

Funding minimums (per month of program): \$1,600 for primary J-1 Exchange Visitor; \$500 for a J-2 dependent spouse; \$300 for each dependent child

Please list all funding sources (names of agencies, individuals, etc.) and the **total** amount of funding to be provided.

Home government source

Total amount

U.S. Government source

Total amount

Other source

Total amount

Personal funds amount

HEALTH INSURANCE REQUIREMENT

The United States Department of State requires that anyone in J status (J-1 or J-2) must obtain adequate health insurance. For detailed information about these requirements, please visit:

<http://iss.ucmerced.edu/scholars/j-1/health-insurance>.

I have read the requirements and agree to maintain adequate health insurance for the length of my J program at UC Merced for myself and any J-2 dependents.

FORM SUBMISSION & SUPPORTING DOCUMENTS

By submitting this form, you are confirming that all information submitted (in form responses and supporting documents) is true and correct to the best of your knowledge.

If you would like to request a DS-2019 for a dependent spouse or child(ren), please complete the Dependent Information Form.

Please submit the following documents with this form:

Copy of current passport

Copy of all previous DS-2019s

Current Curriculum Vitae (C.V.)

Proof of funding (if not receiving enough funding from UC Merced)

Incomplete requests will result in processing delays and/or denials.