

## Travel Signature Request

### J-1 Scholar/Student Intern

J-1 Exchange Visitors should complete and submit this form to OIS at least two to three days prior to international travel and attach:

- Most recent, original DS-2019(s) for you and each J-2 dependent that is traveling
- Proof of valid health insurance (also for any traveling J-2 dependents). Must be valid through travel period.

OIS will contact you when your signed DS-2019(s) is ready. This form may also be brought into OIS during open advising hours and completed same-day, if all documentation is adequate. Please review the OIS "[Travel and Visas](#)" information before traveling. (*J-1 students: do not use this form; see Current Students-> [Travel](#) for guidance.*)

**J-1 Exchange Visitor (EV) Information**

UIN: \_\_\_\_\_ Department: \_\_\_\_\_ Date of Birth (mm/dd/yy): \_\_\_\_\_  
 Family Name/Surname: \_\_\_\_\_ Given Name(s): \_\_\_\_\_  
 Current U.S. Address: Street, House Number, Apt.: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ cell work home Email: \_\_\_\_\_

**Dates and Purpose of International Travel**

J-1 travel dates: From (mm/dd/yy): \_\_\_\_\_ To (mm/dd/yy): \_\_\_\_\_ \*  N/A, Only J-2(s) traveling  
 J-2 travel signatures needed?  No  Yes Number of signatures requested: \_\_\_\_\_  
 J-2 travel dates if separate from J-1: From (mm/dd/yy): \_\_\_\_\_ To (mm/dd/yy): \_\_\_\_\_

\*If J-1 travel is for 60+ days, or for a reason listed below, please complete the following: (use additional sheet if necessary)

- Leave of Absence:  Paid  Unpaid Dates if different from above From (mm/dd/yy): \_\_\_\_\_ To (mm/dd/yy): \_\_\_\_\_  
 Conference  
 Research project (Out of Country Authorization)  
 Other (attach HR/Dept approval)

Name of international research host institution or conference: \_\_\_\_\_

International destination address (Street, Apt #, etc.): \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Country: \_\_\_\_\_ Postal code: \_\_\_\_\_

How research project/conference relates to the Exchange Visitor's program at UIC: \_\_\_\_\_

**Sponsoring Department Information and Signature**

The information provided above is true and correct. If the J-1 has requested an absence longer than 60 days, I also approve of the reason for this request. This J-1 Exchange Visitor is participating in the activities stated on the DS-2019 and is in good standing in our department.

\_\_\_\_\_  
 Signature of Dean/Dept. Head Title Print Name Date

**Certification**

Exchange Visitor Statement of Release: I understand that immigration regulations are subject to change, and ultimately it is my responsibility to be aware of such changes. I further understand that any misrepresentation of information or document fraud may affect my J-1 Exchange Program at the University of Illinois at Chicago. Lastly, I hereby authorize the University to disclose copies of certain documents related to my immigration status to federal agencies if requested to maintain compliance.

\_\_\_\_\_  
 Signature of J-1 EV Print Name Date