

9. Estimated financial support to the alien from all sources *for the total time period specified.*

Minimum (effective 8/1/09): \$1200 per month for the J-1; \$600 per month for the first dependent; \$300 per month for each additional dependent.

University of Illinois funding: \$ _____ for total time period
Is University of Illinois funding coming from any government agency?

No.

Yes. Is funding specifically designated for international exchange?

Yes. Name of agency: _____

No.

Non-University of Illinois funding direct to alien from for time period requested

PROOF OF FINANCIAL SUPPORT must be submitted for non-UIUC funding. (See below)

U.S. government Agency	\$ _____	for total time period
International Organization(s)	\$ _____	for total time period
Exchange Visitor's Gov't	\$ _____	for total time period
Binational (Fulbright) Comm.	\$ _____	for total time period
Other Organization(s)	\$ _____	for total time period
Personal Funds	\$ _____	for total time period

About non-University of Illinois funding:

Funding from the individual's home university is normally "Other Organization", not "Exchange Visitor's Government."

Common sources of government funding:

China Scholarship Commission (CSC); Korean Science & Engineering Foundation (KOSEF); CNPq (Brazil); Japan Society for the Promotion of Research; National Science Council (Taiwan); Ministry of

Proof of funding must be in written form from the provider with recent dates. If from an organization or employer, must be on letterhead. If from an individual such as a parent, should be a notarized statement of intent to provide funding and specify amount and time period, and include bank verification of funds. If it is the J-1's own funds, bank verification is needed.

I _____ (name of Department Head) authorize sponsorship of this visitor. I understand that his/her J-1 program participation may be terminated if he/she

- 1) fails to participate in the proposed activities
- 2) engages in unauthorized employment or
- 3) willfully fails to maintain the required health insurance coverage for him/herself and any dependents.

I understand that his/her faculty host is expected to assist this individual with the accomplishment of his/her objectives. I understand that the J-1 Exchange Visitor must consult with International Student and Scholar Services before making any changes in the activities described on this form. He/she may take one or two classes as long as he/she remains a part-time student and as long as the activity described above remains the primary activity.

Department Head signature

Date

Departmental Contact/Secretary

Campus Address with MC

Phone

E-mail address

Fax Number

The J-1 document (DS-2019) will be given to the departmental contact person to give or mail to the prospective J-1 Exchange Visitor

E-mail when ready for pickup
Send via campus mail

Checklist

The following items are being submitted:

- Continuation request form, all sections completed and with all required signatures.
- Proof of all non-University of Illinois funding.
- Voucher for \$100.

**Return to: International Student and Scholar Services
400 Student Services Building, MC-306
Phone: 3-1303, Fax: 4-0530**