

SYRACUSE UNIVERSITY

CENTER FOR INTERNATIONAL SERVICES (CIS) 310 Walnut Place | Syracuse, New York 13244-2380

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J-1 Scholar / Professor J-2 Dependent Request Form

SECTION 1: J-1 SCHOLAR/PROFESSOR'S INFORMATION					
Full Name:					
	Family/ Last Name (Surname)	Given Name (First)	Middle Name (if any)		
J-1 SEVIS Number:		J-1 DS-2019 End-Date:			
Phone Number:		E-Mail Address:			
SECTION 2: DEPENDENT FAMILY INFORMATION (FOR SPOUSE AND CHILDREN'S J-2 DS-2019)					
		children, a J-1 Scholar or Professor must show to per year (\$500/ month) must be shown for each			

\$14,400 per year (\$1200/ month). Financial Support of \$6000 per year (\$500/ month) must be shown for each J-2 dependent - spouse and child(ren). IMPORTANT NOTE: DS-2019 documents can be issued only to dependent spouses and to unmarried, dependent children under 21 years of age. Married children and children over 21 years old cannot be issued a DS-2019 and cannot hold J-2 status. Full Name of Spouse (required): Family/Last Name (Surname) Given Name (First) Middle Name (if any) Residence Information (required): ___ Spouse's City of Birth Country of Birth **Information** Residence Information (required): ____ Country of Permanent Residence Country of Citizenship Date of Birth: (month/ day/ year):___ Spouse's Gender : male Full Name of Child (required): ____ Family/Last Name (Surname) Given Name (First) Middle Name (if any) Residence Information (required): 1st Child's City of Birth Country of Birth **Information** Residence Information (required): ___ Country of Permanent Residence Country of Citizenship Date of Birth: (month/ day/ year):____ Child's Gender : male Full Name of Child (required): ____ Family/Last Name (Surname) Given Name (First) Middle Name (if any) Residence Information (required): _ 2nd Child's City of Birth Country of Birth **Information** Residence Information (required): ____ Country of Citizenship Country of Permanent Residence Date of Birth: (month/ day/ year):_____ Child's Gender : ___ male For additional children, please copy this section and submit as a separate page with the above requested information about name, residence, date of birth, and gender. REQUIRED DOCUMENTATION TO BE SUBMITTED BY J-1 SCHOLAR/PROFESSOR Copies/Scans of Passport Identification Pages for All Requested Dependents Copy/Scan of Appointment Letter, Proof of Financial Support, or Bank Statement to Cover Additional Dependent Expenses

I certify that the above information is correct and complete.		
Scholar's Signature:	Date:	
		(month/day/year)