



Department Request to Extend J-1 Sponsorship

This information will be used to create Form DS-2019 to extend J-1 sponsorship for a scholar already sponsored by UNMC in J-1 Visa status. Please complete all information and use a computer to complete the form. Do not complete the form by hand. Send completed form via email attachment (international@unmc.edu) or hard copy to International Studies & Programs, zip 5735.

Department Name: _____

Campus Zip: _____

Part I. J-1 Information

Scholar's Name: _____
Given Name Family Name

Date of Birth: _____ (mm/dd/yyyy)

Beginning Date: _____ (mm/dd/yyyy)

Ending Date: _____ (mm/dd/yyyy)

** Short-term scholars can not be extended more than six months after the beginning date. Limit is five years for Research Scholars.*

Part II. Continued Financial Support

Minimum amount is \$1,000/month for short term scholars and \$14,00 per year for research scholars. For each dependent family member, \$2000 per year is required.

Financial support from UNMC: \$ _____

Per: Month ____ Year: ____

Financial support from other organization: \$ _____

Per: Month ____ Year: ____

Financial support from personal funds: \$ _____

Per: Month ____ Year: ____

Name of source from continued support from other organization: _____

** We will need documentation from the source indicating their support.*

Part III. Mandatory Insurance/Fees

UNMC employee health insurance is available to this scholar: Yes ____ No ____

** If scholar will not be employed by UNMC, please send proof of health insurance coverage with this J-1 extension request. To purchase health insurance, go to www.unmc.edu/isp and choose the icon "J-1 Scholars."*

Administrative Signature

Date

Phone Number