

DS-2019 Request Cover Page

for J-2s arriving separately

Exchange Visitor: _____ **Start Date:** _____ **End Date:** _____
(TYPED NAME)

Please attach:

- [DS-2019 Request Form](#) (from FSIS web site)
- [Dependent Information Form](#) (from FSIS web site)
- Evidence of **financial support** (*attach evidence of additional funding if necessary to cover the minimum amount requirements for dependents.*)
- [Exchange Visitor Health Insurance Compliance Form](#) (from FSIS web site)
- Copies of passport biodata/expiration page(s) for each dependent

Have any of the dependents ever previously been in J-1 or J-2 status?

- No**
- Yes** (*attach DS-2019s from all previous periods in J-1 or J-2 status & complete the table below*)

Name	J-1 or J-2?	J-1 Category	Start Date <i>(mm/dd/yyyy)</i>	End Date <i>(mm/dd/yyyy)</i>	Sponsoring Institution

(Attach a separate sheet if more space is needed)

Responsibilities of UH Departments/PIs:

1. Ensure that each J-2 complies with the US DOS Exchange Visitor regulations and UH policies.
2. Ensure that each J-2 makes an appointment to register with FSIS within 10 business days of arrival.
3. Ensure that FSIS is informed of any changes in a J-2's address and/or funding.
4. Ensure that each J-2 departs the U.S. with the J-1 when the J-1 will be absent from the U.S. for an extended period and/or when the J-1 completes his/her EV program.
5. Ensure that each J-2 complies with the EV Program health insurance requirements.

Departmental Signatures: UH departments requesting J-2 documents for the dependents of Exchange Visitors must comply with UH policies and procedures and with DHS and DOS regulations. Signatures below indicate the department's acceptance of these responsibilities.

UH Dept. PI/Faculty Sponsor (TYPED NAME): _____

Title: _____ Email: _____ Phone: _____

Signature: _____ Date: _____

Dept. Chair: _____ **Signature:** _____ **Date:** _____
(TYPED NAME)

Dean/Dir./Chan.: _____ **Signature:** _____ **Date:** _____
(TYPED NAME)

AO/PO (TYPED NAME): _____ Phone: _____ Email: _____

Forward completed cover page and supporting documents to FSIS, Attn: Kathy, PSB 104

FSIS received on:
