J-1 Scholar Data Form - Part A Department Request and Verification

Department inviting J-1 Scholar _____

_____ _____ _____
J-1 Scholar's Family Name First Name Middle Name

Dates of Appointment at UNCG: from_____ to_____
(MM/DD/YYYY) (MM/DD/YYYY)
(Maximum of 5 years - funds must be reasonably assured)

Please check: ☐ Begin a New Program ☐ Extend current status ☐ Transfer to UNCG

Please check: ☐ Research Scholar ☐ Short-term Scholar (up to 6 months)
☐ Professor ☐ Specialist

Site of academic activity: _____
Name of dept/organization Address

University of North Carolina Greensboro Title:_____

Specify Academic Field:_____

During the period covered by this request, financial support (in US $) will be provided to the J-1 Scholar by (check all that apply):

A. ☐ University of North Carolina Greensboro.....…… …...$_____
UNCG ☐ ***has*** ☐***has not*** *received funding for international exchange from one or more US government agencies to support this Exchange Visitor. This does not apply to federal grants awarded to UNCG, unless the grant is specifically for international exchange.*

B. ☐ U.S. Government Agency: _____ $_____
C. ☐ International Organization: _____ $_____
D. ☐ The Exchange Visitor's Government $_____
E. ☐ The Binational Commission in the E.V's Country $_____
F. ☐ Other organization(s) providing support: _____ $_____
G. ☐ Personal Funds $_____

I certify that the department will notify the International Programs Center (IPC) if the J-1 Scholar will not arrive within 30 days of the begin date above, send the scholar to IPC upon arrival, and notify IPC when the J-1 Scholar completes his/her program.

_____ _____ _____
Name of Faculty/Staff Sponsor Faculty/Staff Sponsor Signature Date

_____ _____
E-Mail Phone

_____ _____ _____
Department Contact's Name E-Mail Phone