

DS-2019 APPLICATION FOR J-1 SCHOLARS

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This document is required for all international scholars who request a DS-2019 (J-1). Suffolk University must verify that all J-1 scholars have financial support for the first academic year or the semester (if the program duration is one semester).



Please complete this form and return it to Val Joseph at vjoseph5@suffolk.edu for processing. The DS-2019 will be created after being admitted and upon receiving the following documents along with this application form:

- Copy of Passport
- Proof of English Proficiency. This can be the results of a proficiency exam (TOEFL, IELTS), a degree from an English-speaking institution, or a Skype interview.
- Bank Statement/Letter (issued within 6 months)
- Offer letter or invitation letter from department

If you are transferring from a U.S. institution, we will also need:

- Copy of Current Visa
- Copy of Current DS-2019

Last Name (Family) First Name Middle Name

Date of Birth (MM/DD/YYYY) Place of Birth (City, Country)

Country of Citizenship Country of Permanent Residence

Position/ Occupation in Home Country (ex: professor, graduate student, lecturer, scientist)

Name of Employer or University in Home Country

Gender (Circle one) : Female Male Other

Will you bring family members to the U.S. ? Yes No (circle). If yes, please complete the dependent addendum on page 4.

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Sources and Amounts of Financial Supports for the Exchange visitor's Activity/Living Expenses

Financial support from SU or from funds administered by SU:\$_____

Value of Tuition Waivers and Housing Accommodations Provided by SU: \$_____

Exchange Visitor's Government: \$_____

Other Organizations: \$_____

Personal Funds:\$_____

Family/Sponsor: \$_____

Estimated Expenses: 2019 - 2020

	Per Month	Per Year
Scholar only	\$2,475	\$29,705
Scholar plus one dependent	\$3,879	\$46,548
Scholar plus two dependents	\$4,471	\$53,652
Scholar plus three dependents	\$4,806	\$57,675

***For each additional dependent beyond three, add \$335 monthly**

*Please submit a bank statement/letter with a balance greater than the estimated expenses. The bank statement/letter needs to be issued within 6 months. If you have a sponsor, please submit your sponsor's bank statement/letter.

Financial support from SU or from funds administered by SU:\$_____

Value of Tuition Waivers and Housing Accommodations Provided by SU: \$_____

Exchange Visitor's Government: \$_____

Other Organizations: \$_____

Personal Funds:\$_____

Family/Sponsor: \$_____

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Sponsor Information & Statement

Last Name (Family)	First Name	Middle Name
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Sponsor's Statement of Financial Support

I, _____ (print name of sponsor), guarantee the sum amount of \$_____ USD will be available to the above named scholar for the duration of the scholar's educational program.

Sponsor's Signature: _____ Date: _____

Relationship of Sponsor to Scholar: _____

Sponsor's Address: _____

Scholar's Certification

I have read the information on this form and it is true and accurate statement that the funds are available and will be provided. If any of the information changes at any given time, I will immediately notify the Center for International Programs and Services (CIPS). I understand that making false or fraudulent statements within this Certificate of Finances may result in disciplinary action.

Scholar's Name (Print) : _____

Scholar's Signature: _____

Date (mm/dd/yyyy): _____

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J-2 Dependent Request Form



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Last Name (Family) First Name Middle Name

Number of family members you are bringing with you: _____

If you plan on bringing your family with you to the United States you must complete this dependent request form and attached the **marriage certificate** (if J2 is your spouse) or the **birth certificate** (if J2 is your child). The International Student Services Office will then issues DS-2019's for each dependent so that they may apply for their J-2 visas at the U.S. Embassy or Consulate. Please note: the J-1 Exchange Visitor is responsible for showing that they have the funds necessary to support their Dependents while in the United States.

Dependent 1

Last Name (Family) First Name Middle Name

Relationship to Exchange Visitor (circle one): Spouse Child

Gender (circle one): Female Male Other

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

Place of Birth (City or Town, Country) : _____

Country of Citizenship: _____

Country of Permanent Residence: _____

Dependent 2 -

Last Name (Family) First Name Middle Name

Relationship to Exchange Visitor (circle one): Spouse Child

Gender (circle one): Female Male Other

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

Place of Birth (City or Town, Country) : _____

Country of Citizenship: _____

Country of Permanent Residence: _____

***If you are planning to bring more than 2 family members, please attach additional paper**