J-1 SCHOLAR OUT OF COUNTRY FORM

INSTRUCTIONS:
J-1 Scholars that will travel outside of the U.S. during their approved program activities to engage in research activities that are related to the work being conducted at UB must submit the out of country form to UB Immigration Services.

Step 1: TO BE COMPLETED BY J-1 SCHOLAR:

Scholar’s Name (please print) ___________________________ SEVIS ID Number ___________________________

E-mail Address ___________________________ Phone Number ___________________________

Date of Departure from U.S.: _____/_____/______ Date of arrival to U.S.: _____/_____/______
Mo Day Year Mo Day Year

Name of Institution Abroad: ___________________________________________________________________________

Address Abroad: ________________________________________________
____________________________________________
____________________________________________
____________________________________________
____________________________________________

(City)                                                   (Country)                                                   (Postal Code)

Provide a brief description of the research activities being pursued outside of the U.S., and how those activities relate to the research being conducted at UB.

________________________________________________________________________________________

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Signature ___________________________ Date ___________________________

Please submit this form to UB Immigration Services, University at Buffalo 201 Talbert Hall.
Step 2: TO BE COMPLETED BY J-1 SCHOLAR, DS-2019 MAILING INSTRUCTIONS:

Address Abroad: __________________________________________________________

________________________________________________________________________

(City) (Country) (Postal Code)

Step 3: TO BE COMPLETED BY UNIVERSITY AT BUFFALO HOST DEPARTMENT

Date approved leave from UB: ______/______/______

Mo Day Year

Date J-1 Scholar must return to UB: ______/______/______

Mo Day Year

Department Name

________________________________________

Dept. Administrator Preparing Form

Phone Number

Faculty Sponsor Name

________________________________________

Faculty Sponsor Signature

Date

Provide a brief description of the research activities being pursued outside of the U.S., and how those activities relate to the research being conducted at UB.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Primary Department Chair or Dean Name

Primary Department Chair or Dean Signature

Date

Please submit this form to UB Immigration Services, University at Buffalo 201 Talbert Hall.