

USA J-1 Scholar Request Form

Please allow 5 business days for all requests to be processed

Jag # _____

Full Name: _____

Family/ Last Name (Surname)

Given Name (First)

Middle Name (if any)

Email: _____ Phone Number: _____

Reason for Update/Change to DS-2019

- Change of Name** (new passport copy with name change must accompany this request)
- Update financial information**
- Lost/Damaged Previous Document**
- Travel signature lines full**
- Adding Dependent(s):** Submit updated financial documents including an additional \$750 per month for a spouse and an additional \$650 per month for each child. Attach copies of dependent passport(s) and financial documents, if applicable. Financial documents must be dated within the last six months.

Please complete the information below, if adding dependents:

<u>Dependent Name</u>	<u>City & Country of Birth</u>	<u>Country of Legal Residence</u>	<u>Relationship</u>	<u>Gender</u>
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Spouse email address: _____

Child(ren) email address: _____ ; _____

I understand that my J-2 dependent(s) must be insured beginning the first day of their arrival to the U.S. I will provide evidence of insurance and copies of their DS-2019, passport info page, visa page, and passport entry stamp to the Office of International Education within 3 days of my spouse's and/or child(ren)'s arrival.

Scholar Signature: _____ **Date:** _____