



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER™

Office of Institutional Compliance

EMPLOYEE QUESTIONNAIRE

J-1 EXCHANGE VISITOR (NEW OR TRANSFER-IN) (FY 2020)

Complete ONSCREEN & Submit ELECTRONICALLY
NO HANDWRITTEN REQUESTS WILL BE PROCESSED.
THANK YOU FOR YOUR COOPERATION!

TTUHSC Institutional Compliance
Immigration Compliance & Services
3601 4th Street, STOP 8165
Lubbock, TX 79430
Ph: (806) 743-3949
Email: ICS@ttuhsc.edu

J-1 QUESTIONNAIRE & CHECKLIST

SELF-FUNDED EXCHANGE VISITORS MUST SHOW THESE MONTHLY FUNDING MINIMUMS:

MONTHLY FUNDING MINIMUM ABILENE, AMARILLO, LUBBOCK & ODESSA CAMPUSES	
J-1:	\$1500.00
J-2 (spouse):	\$500.00
J-2 child:	\$300.00 per child

MONTHLY FUNDING MINIMUM DALLAS & MIDLAND CAMPUSES (J-1s AT THE MIDLAND CAMPUS SHOULD CONSIDER LIVING IN ODESSA)	
J-1:	\$2000.00
J-2 (spouse):	\$750.00
J-2 (child):	\$500.00 per child

Document List for ALL new J-1 filings, INCLUDING persons already in J-1 status transferring to TTUHSC:

- ___ J-1 questionnaire with all questions answered
- ___ Curriculum Vitae (CV)
- ___ Highest Academic diploma received and transcripts
- ___ Certified English translation of diploma and transcripts
- ___ Current passport biographical data
- ___ Current US non-immigrant visa (*physically present in the USA*)
- ___ Current [I-94](#) document
- ___ If you have ever held J-1 or J-2 status in the past, provide a copy of all De-2019 or IAP-66 documents
- ___ If you have ever held J-1 or J-2 status in the past, and were subject to 212(e) the two (2) year home residency requirement, provide a copy of J-1 waiver approval (I-612 approval) or J-1 waiver recommendation letter.
- ___ Proof of insurance for the duration of the J-1 program (*this must be given upon arrival in the USA*)
- ___ Proof of funding IF self-funded or receiving non-TTUHSC grant or scholarship funding (*see below*)

Document List for ALL J-2 Dependents, INCLUDING persons already in J-2 status transferring to TTUHSC:

- ___ Marriage certificate, with certified English translation if not in English
- ___ Birth certificates of children, with certified English translation if not in English
- ___ Current passport biographical data page
- ___ Current US non-immigrant visa (if physically present in the USA)
- ___ Current [I-94](#)
- ___ If you have ever held J-1 or J-2 status in the past, provide a copy of all DS-2019 or IAP documents

J-1 EXCHANGE VISITOR QUESTIONNAIRE

FIRST NAME:	
MIDDLE NAME OR INITIAL:	
LAST NAME:	
GENDER:	
CURRENT HOME ADDRESS:	
MAILING ADDRESS FOR J-1 DOCUMENTS:	
ALL OTHER NAMES USED:	
EMAIL ADDRESS:	
PHONE NUMBER:	
DATE OF BIRTH:	
COUNTRY OF BIRTH:	
CITY OF BIRTH:	
COUNTRY OF CITIZENSHIP:	
COUNTRY OF PERMANENT RESIDENCE:	
US SOCIAL SECURITY NUMBER (SSN):	
PASSPORT NUMBER:	
CURRENT VISA STATUS (IF IN THE USA):	
FOREIGN ADDRESS:	
PREFERRED US CONSULATE: (FOR VISA ISSUANCE)	<div><div></div><div>CITY</div></div> <div><div></div><div>COUNTRY</div></div>
HAVE YOU EVER BEEN DENIED A J-1 VISA?	<div>YES</div> <div>NO</div>
HAVE YOU EVER HELD J-1 STATUS?	<div>YES</div> <div>If yes, how long? <div></div></div> <div>NO</div>

HAVE YOU EVER BEEN SUBJECT TO THE EXCHANGE VISITOR HOME RESIDENCE REQUIREMENT?	<div>NO</div> <div>YES</div> <div>WAIVER RECEIVED?<div>YES</div><div>NO</div></div> <div>RETURNED HOME FOR TWO YEAR?<div>YES</div><div>NO</div></div>
CURRENT J-1 SPONSOR or INSTITUTION:	
J-1 SPONSOR ADDRESS:	
CONTACT PERSON NAME (ARO OR RO):	
CONTACT PERSON EMAIL ADDRESS:	
CURRENT J-1 SPONSOR EXCHANGE VISITOR PROGRAM NUMBER:	

NOTE: If you are requesting a change of status while in the USA, you should not leave the US while the J-1 application is pending. If you leave the USA before the J-1 change of status is approved; you must obtain a J-1 visa from a US Consulate. If you are outside of the USA, you will obtain a J-1 visa from a US consulate before entering the USA in J-1 visa status.

NOTE: IF YOUR SPOUSE AND CHILDREN WILL ALSO TRAVEL TO THE USA, EACH FAMILY MEMBER WILL NEED THEIR OWN DS-2019 DOCUMENT TO OBTAIN A J-2 VISA. PLEASE PROVIDE INFORMATION ON EACH FAMILY MEMBER WHO WILL BE TRAVELING TO THE USA BELOW

EXCHANGE VISITOR FAMILY INFORMATION

Each family member seeking a J-2 visa or J-2 visa status must be list below. Use additional sheets if necessary.

SPOUSE INFORMATION:	
FIRST NAME:	
MIDDLE NAME:	
LAST NAME:	
COUNTRY OF BIRTH:	
COUNTRY OF CITIZENSHIP:	
DATE OF BIRTH:	
EMAIL ADDRESS:	

CHILD #1 INFORMATION:	
FIRST NAME:	
MIDDLE NAME:	
LAST NAME:	
COUNTRY OF BIRTH:	
COUNTRY OF CITIZENSHIP:	
DATE OF BIRTH:	
EMAIL ADDRESS:	

CHILD #2 INFORMATION:	
FIRST NAME:	
MIDDLE NAME:	
LAST NAME:	
COUNTRY OF BIRTH:	
COUNTRY OF CITIZENSHIP:	
DATE OF BIRTH:	
EMAIL ADDRESS:	

CHILD #3 INFORMATION:	
FIRST NAME:	
MIDDLE NAME:	
LAST NAME:	
COUNTRY OF BIRTH:	
COUNTRY OF CITIZENSHIP:	
DATE OF BIRTH:	
EMAIL ADDRESS:	

CHILD #4 INFORMATION:	
FIRST NAME:	
MIDDLE NAME:	
LAST NAME:	
COUNTRY OF BIRTH:	
COUNTRY OF CITIZENSHIP:	
DATE OF BIRTH:	
EMAIL ADDRESS:	

CHILD #5 INFORMATION:	
FIRST NAME:	
MIDDLE NAME:	
LAST NAME:	
COUNTRY OF BIRTH:	
COUNTRY OF CITIZENSHIP:	
DATE OF BIRTH:	
EMAIL ADDRESS:	

EXCHANGE VISITOR REQUIREMENTS

SEVIS FEE PAYMENT

All Exchange Visitors must pay an I-901 SEVIS fee before obtaining a J-1 visa. This fee must be paid online at <https://www.fmjfee.com/i901fee/index.html>. Detailed information about the fee is also at that website.

Insurance:

The Exchange Visitor program requires all participants and their family members in J-2 status to carry insurance for the entire duration of the exchange visitor program. The insurance must be valid from the start of the program until the final date of the program. All Exchange Visitors (J-1 principal and J-2 dependents) are required to have sickness and accident insurance and medical evacuation and repatriation insurance in effect for the duration of their exchange visitor program. The insurance requirements are listed below.

TTUHSC will provide health insurance (medical, vision, dental) for J-1 employees but that insurance will not begin until at least two full months of employment are completed. If you begin employment after the first day of the month, you will have to work two additional full months before being eligible for the TTUHSC health insurance plan. Therefore, every J-1 employee must obtain their own health insurance to cover the period of time from the start date of the J-1 program and until they are able to join the TTUHSC health insurance program. Also note that TTUHSC health insurance plans do not provide coverage for medical evacuation or repatriation of remains so you will need to obtain separate insurance that provides this coverage.

ICS will send you a list of Exchange Visitor insurance providers. You are required to show proof of insurance coverage on the day you arrive at TTUHSC. The insurance must be valid as of the J-1 program start date. ICS cannot confirm your arrival and validate your J-1 program in the SEVIS system without proof of the required insurance coverage.

Whichever insurance plan you purchase must meet all of the following coverage requirements established by the US Department of State:

1. Medical benefits of at least **\$100,000** per accident or illness.
2. Deductible no greater than **\$500** per accident or illness.
3. **\$50,000** minimum coverage for expenses associated with the medical evacuation of the exchange visitor to his or her home country.
4. **\$25,000** minimum coverage for expenses associated with repatriation of remains to exchange visitor's home country.
5. Pre-existing conditions must be covered after a 12-month waiting period.
6. Coverage may include a provision for maximum 25% coinsurance or co-payment paid by the exchange visitor. Co-insurance must allow for customary & reasonable charges in US dollars, not equivalent cost for services in home country.
7. Coverage cannot exclude benefits for perils inherent to the activities of the program in which the visitor participates.
8. Policy must be underwritten by an insurance corporation meeting the US Department of State rating requirements or backed by the full faith and credit of the visitor's home country government, designated sponsor, or exchange visitor's employee group plan.

J-1 Exchange Visitors who choose to purchase health insurance in their home country (prior to arrival in the United States) must purchase insurance that meets US State Department requirements (see above). Written proof of policy benefits must be provided in English, with coverage limits converted to US dollars. To avoid complications, ICS recommends that you obtain insurance from a US insurance agency. US insurance agencies that insure J-1 and J-2 exchange visitors allow you to purchase the insurance before entering the USA.

Upon arrival at TTUHSC check in with ICS.

EXCHANGE VISITOR RESPONSIBILITIES & ATTESTATION

The following are responsibilities of Exchange Visitors in maintaining J-1 and J-2 immigration status in the United States under the Texas Tech University Health Sciences Center Exchange Visitor Program.

1. Exchange visitors must be familiar with the conditions of the J-1 and J-2 status as described on the Form DS-2019. Any questions concerning these conditions should be directed to Immigration Compliance & Services (ICS).
2. Exchange visitors must check in with ICS on their first day of arrival at TTUHSC. Please bring your passport, documentation of the purchase of the required insurance and all United States immigration documents to ICS upon your arrival at TTUHSC.
3. If you are not entered as active on the SEVIS system by this office within 30 days of your starting date on your DS-2019, ICS is required to report you as a “No-Show” in the SEVIS system.
4. Exchange visitors must notify the Alternate/ Responsible Officer in ICS of any change in their programs as described on form DS-2019, and of any change of US address, email address, or phone number.
5. Exchange visitors must contact the Alternate/Responsible Officer in ICS approximately sixty days before the end date of the DS-2019 in order to request a program extension. Extensions must be completed prior to the current J-1 program end date.
6. Exchange visitors must maintain an adequate health, medical evacuation and repatriation insurance policy for themselves and all dependents for the entire duration of the J-1 program while in the United States. Proof of insurance must be provided to ICS upon entry into the USA and upon request. The insurance requirements are discussed on an earlier page. Please review the requirements carefully. Willful failure to meet the health insurance requirements may cause premature termination of your program in the United States.
7. Exchange visitors must notify the Alternate/Responsible Officer at ICS of their dates of departure, and ports of exit prior to their departure from the United States.
8. Exchange visitors must maintain a valid passport at all times during their J-1 program. Expiring passports must be renewed in a timely fashion.
9. Exchange visitors give ICS permission to retrieve their I-94 document and US travel history from the online I-94 website maintained by US Customs & Border Protection.

I have carefully read the Exchange Visitor Responsibilities and understand my responsibilities under the program.

_____ Exchange Visitor Name	_____ Exchange Visitor Signature	_____ Date
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