

Office of Global Affairs

# Academic Training Application for J-1 Students

Academic Training is a benefit of J-1 student status that allows J-1 degree and non-degree seeking students the opportunity for employment directly related to the student's academic curriculum. **Prior to beginning employment**, the student must receive permission from the State University of University of New York and obtain an updated DS-2019 with the approved Academic Training information.

Although Academic Training cases are reviewed on an individual basis, there are a few guidelines to keep in mind. Only the Program Sponsor (the entity which issued the DS-2019) may authorize Academic Training. The student's primary purpose for being in the U.S. must be study rather than work. <u>The work must be directly related to the field of study listed on the DS-2019</u>. Academic Training is for specific offers of employment, thus, a job offer is always required before the request may be approved.

### Pre-Requirements for making application:

- Hold J-1 student status and have an unexpired DS-2019
- Be in good academic standing
- Have a letter of employment offer from employer

#### Time Limits

For all students, the period of academic training cannot exceed the period of time spent as an enrolled student. Work must begin no more than 30 days after completion of study. <u>Applications for academic training must be made well in advance of the program expiration date on the DS-2019 as a valid DS-2019 is required at all times</u>.

For Non-Degree seeking students, the combination of time spent as a student plus time spent doing Academic Training can not exceed a maximum of 24 months.

For Degree Seeking students, generally, 18 months cumulative throughout all programs is allowable; for example, if 4 months were used at the Bachelor's level and 8 months at the Master's level, there would be 6 months left for use during a doctoral program.

#### Full-time and part-time Work while on Academic Training

Part-time work is deducted from the overall time limit at the same rate as full-time work. Part-time work is defined as 20 hours or less per week. Full-time work is defined as more than 20 hours per week. You must request the appropriate level of work during the application process so please discuss these definitions with your potential employer before requesting authorization.

#### **Financial Requirements**

Work done during academic training can be paid or unpaid. For unpaid work, a student must show how they will be supported during the period of academic training.

#### Academic Training Application Required Documents:

The following items must be submitted to your campus's Exchange Visitor Advisor **<u>at least 3 weeks prior to expected start</u>** to request Academic Training:

- Student Request Form
- Job offer letter from the prospective employer including job title, start and end date of proposed employment, number of work hours per week, location of employment, rate of pay, brief description of duties to be performed and the name, telephone number and email address of the supervisor for the position.
- Academic Advisor Recommendation Form
- Financial information if work will be unpaid

The State University of **New York** 

Date Received:

in SEVIS:

Office of Global Affairs

## Academic Training: Student Request Form

This form should be completed by the exchange student requesting Academic Training and returned to their campus's Exchange Visitor Advisor for processing with the other required forms. All sections must be completed. PLEASE WRITE CLEARLY AND LEGIBLY IF YOU ARE NOT FILLING THIS FORM ONLINE.

Student's Name:	
Campus:	Student ID #:
Email:	SEVIS ID:
Field of Study:	
Degree Level: 🗌 Non-Degree 🗌 Associate's 📄 Bachelor'	s 🗌 Master's 📄 Doctoral
Please list any previous periods of Academic Training:	
I request authorization for D part-time (20 hours or less per	week) or 🗌 full-time (more than 20 hours per week)
of Academic Training from (date) to (c	date) at the following employer:
Employer/Company Name:	
Address: (include street # & name)	
City: Stat	e: Zip Code:
Training Supervisor's Name:	
Training Supervisor's Email:	
Training Supervisor's Phone:	
Brief Description of Duties: PLEASE BE SPECIFIC AND DETAILED	
<ul> <li>I understand that:</li> <li>* Academic Training must be directly related to the field of study listed on my DS-2019.</li> <li>* I may begin work only <b>after</b> I have received an updated DS-2019 form indicating the Academic Training has been been approved and only for the dates specified on the DS-2019.</li> <li>* I may only work for the employer listed and either PT/FT as specified in my SEVIS record.</li> <li>* I will inform my Exchange Visitor Advisor of any address changes within 10 days of moving.</li> <li>* I will maintain health insurance coverage for myself and my J-2 dependents as required by the J Exchange Visitor Program.</li> </ul>	
Signature:	Date:
For RO/ARO only:	
Date Authorized	Completed by:

(RO/ARO Name)