Faculty Sponsor Information

The Process:
1. This form is completed and submitted to Jane Bergman at jbergman@illinois.edu.
2. Jane checks the form for completeness, creates the invitation letter, and e-mails the invitation to the visitor. If the visitor accepts the invitation, they must reply indicating so.
3. If the visitor is to be paid by UIUC, a background check must be completed before we can proceed with the visa request. Caitie will submit the background check request which will send an email requiring action from the visitor. If the visitor is not paid, step 3 will be skipped.
4. Upon receiving the background check clearance or the acceptance letter only (for non-paid visitors), Jane creates application in "I-Start".
   a. Visitor receives and completes the personal information section.
   b. Faculty Sponsor confirms in I-Start the English proficiency of the visitor to complete the objectives.
   c. Jane submits completed I-Start file to ISSS with $150 processing fee, which (in most cases) the visitor will need to reimburse upon arrival to the department.
5. ISSS issues the DS-2019 document and directions, which Jane ships to the visitor.
6. Visitor makes an appointment at their consulate or embassy and waits for them to complete their visa.

Timing:
Please allow **at least 2 months** for the visitor to start their program here:
a) Steps 1 – 4 often take two or more weeks
b) Step 5 takes two weeks
c) Step 6 can take four or more weeks, but often is done in less time.
d) IF the visitor can't get here before fourteen days after the start date of the DS-2019, we will need to amend the date(s) to a more accurate arrival date.

Please note that by submitting this completed form to the Mathematics Main Department Office, you are agreeing to the conditions of sponsoring the below named visitor to your department.

- **I have evaluated the credentials for the visitor named below and he/she has the minimum of a bachelor's degree plus experience in the field, and is considered to be qualified to pursue the objectives described in the job description.**
- **I have determined that the visitor named below has sufficient English language proficiency to enable him/her to successfully carry out the activities described in the job description.**
- **I agree to help this individual accomplish the objectives of his/her J program. I understand that he/she must consult with ISSS before making any changes in the activities described on this form. I understand that the regulations of the J-1 program restrict this individual's employment possibilities and that his/her options for taking classes are limited.**

Math Faculty Sponsor:

Visitor's Information

Name **as it is in your passport**: Last Name (or family name):
First Name: Middle Name or initial:
Email Address (**should be @gmail, @hotmail, or @yahoo email server. Others may not function properly.**):

Country of Origin:
Birth Date:
Position in home country:
Name of visitor's employer or university:
Mailing address (**Where they want the DS-2019 sent to**):

Phone #:

UIUC Job Title:
- ☐ Visiting Scholar
- ☐ Postdoctoral Research Associate
- ☐ Student Intern (Undergrad who has not completed a Bachelor's degree)
  - o If Student Intern:
    - ▪ Current Field of Study:
    - ▪ Expected Date Degree will be Awarded:

Where will the employee physically work during the duration of their J-1 status?

Specialized field: *(e.g. Topology, Actuarial Science, Number Theory, etc.)*

Job Description: *Provide approximately one paragraph to describe the research work this individual will be performing.*

FTE for visitor *(100% if you will be paying them and expecting them to work full-time, 50% if you are paying them and expecting them to work part-time, 0% if you are not paying them but they will be providing their own funding to visit)***:**

Start Date:
(Be aware the actual start date could differ depending on when the actual visa is issued.)

End Date:

Visitor's Funding

Salary
- ☐ On UIUC funds
  - • **If on UIUC funds – CFOP/Account to be paid from:**
  - • Salary Amount:

- ☐ Not on UIUC funds
  Source:
  Amount/month: $

Basic Information deemed necessary by the China Scholarship Council:
Applicant Name:
Applicant Birth Date:
Applicant's Domestic Institution:
Station of Applicant in host institution:
Duration of Study Abroad:
Study topic and Host Supervisor of Applicant:
English level of applicant meeting demands of visiting scholar:
Address of Host Supervisor: