

Exchange Visitors: Extension of Stay within the Maximum Participation Period

Disclaimer: This handout is designed for J-1 Visiting Professors/Research Scholars and Short Term Scholars, and outlines the procedures to follow if you need to extend your permission to stay in order to accomplish your original program objective. The included extension form is for use by scholars with KGI as their program sponsor. KGI OISS has prepared this guide to provide you with general guidance. However, any advice provided to you by our office, as well as the information in this document, should not be construed as legal advice.

Why Extension is Necessary

Your permission to remain in the United States ends 30 days after the end date shown in item #3 of your DS-2019. If you wish to continue your program objectives, you must extend your DS-2019 before this end date is reached. Once you enter into your 30 day “grace period,” an extension is not possible, and you must make plans to depart the US. Visiting Professors/Research Scholars are limited to a maximum participation period of 5 years. Short Term Scholars are limited to a maximum participation period of 6 months. No extensions beyond these periods can be given.

Your J-1 Responsible Officer (RO)

To extend your permission to stay in the United States, you must obtain a new DS-2019 from your J-1 Responsible Officer (RO), who will need proof of your eligibility to continue before issuing the Form DS-2019. If Keck Graduate Institute is not your sponsor, and if you are uncertain how to reach your RO, the Office of International Students and Scholars can help you identify this individual, but has no authority to grant the extension.

Eligibility

You are eligible to apply for an extension of stay if:

1. You are working toward the objective shown on your most recent DS-2019;
2. You are maintaining your status as a J-1 Exchange Visitor;
3. You can demonstrate adequate funding for the period of the proposed extension; *and*
4. Your extension will not carry you beyond the maximum period of participation for your category.

Applying for the Extension

If KGI is not your program sponsor, contact your RO two months prior to your expiration date to inquire on their processes. If KGI is your program sponsor, complete the extension form at the end of this packet and return the form no later than two weeks before your DS-2019 end date along with the following:

1. A letter of confirmation from your employer documenting renewal of your affiliation with your institution; *and*
2. Proof of adequate funding for the period of your extension.

Failure to Request Extension of Status in Timely Manner

Extension of your permission to stay is your responsibility. If you forget the deadline and apply late, you risk denial. If you are employed and overlook the date, you will be working illegally. Since such mistakes can have serious consequences, you should make certain that you apply well in advance (one month is recommended) if you need to extend your stay.

The Office of International Students and Scholars

Building: 535 • Phone: 909.607.8586 • Fax: 909.607.8086 • email: international@kgi.edu • website: kgi.edu/international

Extension of Stay: Request Form

To extend your DS-2019, please submit this form, along with your offer extension letter and proof of funding to the KGI OISS no less than two weeks before your current DS-2019 expires.

PERSONAL INFORMATION (to be completed by scholar):

Date of Submission: _____ SEVIS ID Number: _____
NXXXXXXXXX; on top of DS-2019

Name: _____
Last/Family Name First Name

KGI Email Address: _____

Are you or your dependents planning to travel out of the country in the next 6 months? Yes No

EXTENTION VERIFICATION (to be completed by supervisor):

I am verifying through my signature below that the above-named scholar needs additional time to complete his/her original program objectives:

Inviting Faculty Printed Name Signature Date

FUNDING VERIFICATION (to be completed by scholar):

Program	Tuition	Living Expenses*	Health Insurance*	Estimated Total**
J-1 Scholar	N/A	\$1600 per month	\$70 per month	1,670 per month

* Living Expenses& health insurance are an estimate. Actual cost will vary according to arrangements

** An additional \$4,000 is required for a spouse and \$3000 for each dependent

SOURCE OF FUNDING

Enter the source(s) and amount(s) of your financial support, in U.S. dollars. <u>Attach financial documentation supporting these claims.</u> Please note that a DS-2019 cannot be issued based on future earnings (i.e. salary statements) or on funds that are not readily available (i.e. documentation of stock holdings or investment portfolios, credit card statements, etc.).	
Personal Funds	US\$
Family or Individual Sponsor's Funds Sponsor must attach a written, signed statement of support.	US\$
Sponsoring Organization, Firm, or Government (attach signed award letter)	US\$
KGI Award/Offer Letter (please attach)	US\$
Other – please specify:	US\$
TOTAL AMOUNT OF SUPPORT (must add up to minimum required)	US\$

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