

INTERNATIONAL STUDENT & SCHOLAR SERVICES

University of Connecticut ☎ 2011 Hillside Road, Unit 1083; Storrs, CT 06269 ☎ Phone: 860-486-3855 ☎ Fax: 860-486-5800
☎ Web: <http://www.iss.uconn.edu> ☎ Web: international@uconn.edu

J-1 VISITING SCHOLAR PROGRAM EXTENSION REQUEST FORM

PROGRAM INFORMATION (To be completed by the Department):

Department: _____

Requested Extended Program Period: From _____ to _____
(mm/dd/yyyy) (mm/dd/yyyy)

Why do you need to extend the program? (check all that apply)

- The contract of the EV's current position has been renewed.
 The EV needs more time to complete his/her program than originally expected
 The EV needs more time to complete his/her program due to unexpected research problems
 Other (be specific and explain in detail): _____

Will the site of work remain the same as the current site for the extended period? Yes No

If no, please provide the new/additional site of work information:

Name of new/additional site of work: _____

Address of the new/additional site of work: _____

Street and apartment #

City

State

Zip code

Will the exchange visitor's program objective (i.e. field of research or teaching) remain the same as the current program objective for the extended period? Yes No *(to be eligible for an extension, the research/teaching field must remain consistent)*

Name of Faculty Sponsor

Signature of Faculty Sponsor

Date

PERSONAL INFORMATION (To be completed by the Exchange Visitor):

Name: _____ UConn ID: _____
Family Name First Name

Date of Birth: _____
(mm/dd/yyyy)

Local Address: _____
Street and apartment # City State Zip code

Home Phone Number _____ Cell Phone Number _____

UConn Email Address _____

Personal Email Address _____

Have you applied for a waiver for 212(e) requirement? Yes No I Don't Know

Have you received a waiver for 212(e) requirement approval?

Yes *(Please provide a copy of approval/No-Objection Letter)* No

Do you have dependent(s) with you on J-2 visas?

Yes *(If selected, their Form DS-2019s will be automatically extended.)* No

EV Signature: _____

Date _____

**ACADEMIC DEPARTMENT'S FOREIGN NATIONAL
DEEMED EXPORT COMPLIANCE VERIFICATION**

United States export laws, including the Export Administration Regulations (EAR) and the International Traffic in Arms Regulations (ITAR), prohibit the disclosure, including oral or visual disclosure, or transfer of controlled technical data to foreign persons, whether in the United States or abroad. In accordance with this prohibition, the United States Citizenship and Immigration Services requires employers to certify whether a foreign national employee will have exposure to export-controlled technology or technical data.

To ensure UConn's compliance with export and visa sponsorship laws, please complete the following checklist to the best of your ability. If you have questions about the checklist or the types of technologies that are export-controlled, indicate that you require assistance. The Office of the Vice President for Research will then be in contact with you. For information about Export Control Compliance at UConn, please see here: <http://research.uconn.edu/>.

If the foreign national will work on a sponsored project, please enter the KFS number(s) here. (Enter "N/A" if does not apply):	_____
Will the foreign national participate in any research that is NOT intended for public dissemination or that may be subject to publication restrictions?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will any unpublished information or data provided by a sponsor funding a research project be disclosed to this foreign national?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will the foreign national be exposed to equipment that was specifically designed or developed for military or outer space applications (e.g., night vision cameras, satellite technology, Y-code GPS, fighter jet engines, submarine applications, etc.)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I don't know – I need assistance
Will the foreign national be exposed to encryption software source code, or otherwise be involved in the design, development or production of encryption software?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will the foreign national need to understand how a piece of laboratory equipment is designed, manufactured, or repaired in the course of the research?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> I don't know – I need assistance
If you checked "Yes" or "I don't know" to any of the above, please explain:	

By signing below, I certify under penalty of perjury that the information in this form is true and correct to the best of my knowledge and that I will contact the Office of the Vice President for Research (OVPR) or International Student & Scholar Services (ISSS) if any of the above information changes.

Signature of Department Head	Date	Name of Department Head
Signature of Principal Investigator, if applicable	Date	Name of Principal Investigator and Title, if applicable

This memorandum accompanies a petition and/or sponsorship request on behalf of:

Name of foreign national: _____ Country of citizenship: _____

Requested visa petition type: _____ Period: from _____ to _____