



SECTION 1: J-1 SCHOLAR INFORMATION UPDATE (TO BE COMPLETED BY SCHOLAR)

NAME: _____
Family Name (Surname) _____ Given Name (First) _____

CWID: _____

Physical Address: _____
(Apt. or House) _____

E-mail address: _____ **Phone Number:** _____

FINANCIAL INFORMATION: If self- or externally-funded, the minimum funding requirement for a visiting scholar, professor, or specialist is \$1500 per month (\$18,000 per year) and \$500 per month (\$6000 per year) for each accompanying dependent.

If funds are from an international organization, an independent grant, or government support, please attach a signed copy of any letters of award or sponsorship. If funds are personal, please attach an official bank statement not more than 6 months old.

SOURCE OF FUNDS	ASSURED SUPPORT (IN US DOLLARS)
	\$

I certify that the above information is correct and complete, and that I shall notify the University of any change in my personal information or research/teaching plans.

Scholar's Signature _____ Date (month/day/year): _____

SECTION 2: DEPARTMENT APPROVAL FOR J-1 EXTENSION

UA Academic Department: _____

Supervisor's Name: _____ Supervisor's Email: _____

Phone Number: _____ Fax Number: _____

Duration of Extension for J-1 DS-2019 (new end-date): _____
month day year

By signing below, the J-1 Supervisor and Department Chair re-affirm that they will comply with the following responsibilities:

- 1) If an additional extension of program is necessary, the department will process an extension request and provide an updated appointment letter and proof of any additional funding at least two weeks prior to the current program end date.
- 2) If the exchange visitor ends his or her service to The University of Alabama more than 30 days earlier than the expected appointment date, the department will inform International Student & Scholar Services so that his or her immigration record can be updated as required by law.
- 3) Upon completion or termination of appointment, the department will inform International Student & Scholar Services of the exchange visitor's departure date by either email or formal letter.

Required Signatures:

Supervisor Signature: _____ Date: _____

Dept. Chair/ Director Signature: _____ Date: _____

SUPPORTING DOCUMENTATION TO BE SUBMITTED WITH THIS FORM

- Copy/Scan of updated Appointment Letter
- Copy/Scan of Proof of Financial Support or Bank Statement, if independently funded
- Copy/Scan of [Proof of Insurance with Medical Evacuation and Repatriation Coverage](#) (For J-1 Scholar and any dependents)
- Copy/Scan of most recent CV/ Resumé.



J-1 Extension: EXPORT CONTROL REVIEW

OVERVIEW OF EXPORT CONTROL REQUIREMENT

In support of your request for visa sponsorship, International Student & Scholar Services asks the department to complete the following questionnaire. ISSS will send this documentation to the [Office of Research Security and Export Control \(orsec@ua.edu\)](mailto:orsec@ua.edu), who will review the form and if necessary will confer with the sponsored-individual and appropriate supervisor or administrator to determine whether a license under EAR or ITAR would be required. The license acquisition process would be initiated in parallel to visa sponsorship. Any future changes or extensions of the visa sponsorship/employment must also be reviewed for compliance. For more information about Export Control: <https://research.ua.edu/resources/export-controls/>.

SECTION 1: EMPLOYEE/SCHOLAR AND DEPARTMENT DETAILS

Employee/Scholar's Name: _____
 Employee/Scholar's Country of Citizenship: _____ Employee/Scholar's Country of Birth: _____
 PI/Supervisor's Name: _____
 School/Division: _____ Department: _____

SECTION 2: EXPORT CONTROL QUESTIONS

1. Will the applicant's work involve research or activities in a scientific, engineering, technology, or medical field?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Is the nature of the applicant's work confidential/proprietary (i.e., the results of the work/research projects are not intended for teaching, publication, or to be otherwise shared broadly with the interested public and within the scientific community?)	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. Will the applicant work on sponsored awards which include publication restrictions or personnel participation restrictions?	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Do you anticipate that the applicant will have access to:	
a. any UA-owned technical data or technology that is considered proprietary or confidential to UA?	<input type="checkbox"/> YES <input type="checkbox"/> NO
b. any third party-owned technical data or technology that is considered proprietary or confidential to the third-party owner? (This includes U.S. government furnished technical data with dissemination controls or other restrictive markings, ITAR-controlled software, and information restricted under an NDA or a sponsored award that restricts publication of results.)	<input type="checkbox"/> YES <input type="checkbox"/> NO
c. items or software specifically designed or developed for military or space applications? (see ITAR U.S. Munitions List under 22 CFR § 121).	<input type="checkbox"/> YES <input type="checkbox"/> NO
d. items or software listed in the EAR Commerce Control List ?	<input type="checkbox"/> YES <input type="checkbox"/> NO
e. software with encryption features?	<input type="checkbox"/> YES <input type="checkbox"/> NO
f. software source code which is not publicly available?	<input type="checkbox"/> YES <input type="checkbox"/> NO
g. items or information that support design, production, or use of nuclear, chemical, or biological weapons?	<input type="checkbox"/> YES <input type="checkbox"/> NO

REQUIRED SIGNATURES

We attest that the information being provided at this time is true. If it is determined that at this time no export license is require, but during the course of their employment at UA there are any changes to the Employee/Scholar's work that would require a license, we will contact the Office of Research Security and Export Control and International Student & Scholar Services.

PI/Supervisor: _____ Date: _____
 Chair/Director or Dean: _____ Date: _____

- A license for Export Control **is not** required for this employee/scholar.
 A license for Export Control **is** required for this employee/scholar, and that process has been initiated.

Office of Research Security & Export Control: _____ Date: _____