

Sample DS-2019

All J-1 international students at UC San Diego are responsible for keeping their Form DS-2019 up to date. If you are a new student, continuing student, or an alumni on AT, use our sample to understand all of the information on your Form DS-2019.

Page one

Biographical Information

Ensure that all personal information listed here is correct.

Program information

Ensure that your program category, subject of study, and program start date are correct. **Your program end date should be in the future unless you have graduated.**

212e Bar

The 212e bar applies to Research Scholar or Professor categories. Speak with an advisor to learn more.

Your Signature

Sign your DS-2019 here.

SEVIS ID & Visa Class

Your SEVIS ID and visa class will be here. Dependents will be J-2.

ARO Signature

An Alternate Responsible Officer from UC San Diego will sign your form here.

Travel Signature

You will need a valid travel signature every time you enter the U.S. If your travel signature has expired, please request a new one.

U.S. Department of State		OMB APPROVAL NO 1465-0119
CERTIFICATE OF ELIGIBILITY FOR EXCHANGE VISITOR STATUS (J-NONIMMIGRANT)		ESTIMATED BURDEN TIME: 45 min
		*See Page 2
1. Surname/Primary Name: KLING Given Name: KLING Gender: MALE		NO012345678
Date of Birth (mm-dd-yyyy): 09-18-1960 City of Birth: Atlantic Country of Birth: Oceania Citizenship Country Code: OC Citizenship Country: Oceania	J-1	
Legal Permanent Residence Country Code: OC Legal Permanent Residence Country: OSGEMTA Position Code: 215 Position: UNIVERSITY UNDERGRADUATE STUDENTS		
Primary Site of Activity: University of California, San Diego 9500 GILMAN DR LA JOLLA, CA 92093-5004		
2. Program Sponsor: University of California, San Diego Program Number: P-1-02849		
Participating Program Official Designation: PROFESSOR; RESEARCH SCHOLAR; SHORT-TERM SCHOLAR; SPECIALIST; STUDENT ASSOCIATE; STUDENT BACHELORS; STUDENT DOCTORATE; STUDENT INTERNS; STUDENT MASTERS; STUDENT NON-DEGREE		
Purpose of this Form: Begin new program, accompanied by number (0) of immediate family members.		
3. Form Covers Period: From (mm-dd-yyyy): 09-25-2023 To (mm-dd-yyyy): 06-14-2024		4. Exchange Visitor Category: STUDENT NON-DEGREE Subject Field Code: 24 Subject Field Code Remarks: Full time undergraduate non-degree exchange student.
5. During the period covered by this Form, the total estimated financial support (in U.S.\$) to be provided to the exchange visitor by: Sponsor, Program Sponsor, Funds: 440,000.00 Parental Funds: 022,417.00 Other: 070,004.00		
6. RESPONSIBLE OFFICER OR ALTERNATE RESPONSIBLE OFFICER ATTENTION: I do not intend to use this Form DS-2019, the Program Sponsor or organization identified above, for which I serve as the Responsible Officer or Alternate Responsible Officer, has verified, in accordance with the requirements of 22 CFR 61.120(b), that each prospective exchange visitor: (i) is eligible and qualified for, and accepted into, the program in which he or she will participate; (ii) possesses adequate financial resources to participate in and complete his or her exchange visitor program; and (iii) possesses adequate financial resources to support an accompanying spouse and dependent, if any. I also attest that you, pending and signing this Form, I am physically present in the United States on an H-1B, H-2B, H-3, or H-4 nonimmigrant status and have been provided to the U.S. Department of State.		7. Eleanor Roosevelt Name of Official Preparing Form: 9500 GILMAN DR 95011 Code 0123 LA JOLLA, CA 92093 Address of Responsible Officer or Alternate Responsible Officer: UCSD Digitally signed by Eleanor Roosevelt Date: 2023.09.25 08:35:00 PDT Signature of Responsible Officer or Alternate Responsible Officer
8. Statement of Responsible Officer for Releasing Sponsor (FOR TRANSFER OF PROGRAM) Effective date (mm-dd-yyyy): _____ Transfer of the exchange visitor from program number _____ sponsored by the program sponsor as in 2 is necessary or highly desirable and is in conformity with the objectives of the Mutual Educational and Cultural Exchange Act of 1961, as amended.		Alternate Responsible Officer: Titu Telephone Number: 858-534-3730 Date: 09-01-2023 Date (mm-dd-yyyy): _____
PRELIMINARY ENDORSEMENT OF CONSULAR OR IMMIGRATION OFFICER REGARDING SECTION 212(e) OF THE IMMIGRATION AND NATIONALITY ACT AND PL 94-48, AS AMENDED (see item 1(e) of page 2)		TRAVEL VALIDATION BY RESPONSIBLE OFFICER (Maximum validation period is 1 year 7 months) *EXCEPT: Maximum validation period is up to 6 months for Short-Term Scholar and 6 months for Camp Counselors and Summer Work Travel. (1) Exchange Visitor is in good standing at the present time 9/1/2023 Date (mm-dd-yyyy) UCSD Digitally signed by Eleanor Roosevelt Date: 2023.09.01 08:30:29 -0700 Signature of Responsible Officer or Alternate Responsible Officer (2) Exchange Visitor is in good standing at the present time Date (mm-dd-yyyy)
THE U.S. DEPARTMENT OF STATE RESERVES THE RIGHT TO MAKE FINAL DETERMINATION REGARDING 212 (e)		Signature of Responsible Officer or Alternate Responsible Officer
EXCHANGE VISITOR CERTIFICATION: I have read and agree with the statements in item 2 on page 2 of this document.		
Signature of Applicant	Place	Date (mm-dd-yyyy)

Page Two

The last page of your DS-2019 is an annotation section that includes the terms and conditions you are agreeing to when you sign your DS-2019. This page contains important information about maintaining your F-1 visa status.

KEY POINTS

- ✓ **Never Throw Away Documents:** Keep all copies of your DS-2019 from UC San Diego and any other institution you attend in a safe and accessible place.
- ✓ **Update your Documents:** Your DS-2019 needs to be updated any time there is a change to the information on the form.
- ✓ **Make your Documents Accessible:** Keep digital copies of your DS-2019 and other documents on your phone.
- ✓ **Document Self-Check:** Ensure that your forms are in order every time you enter the U.S.