Academic Training
Information & Request Form

Academic training is designed to allow J-1 students the opportunity to apply knowledge gained in the classroom to a practical work experience. It is available for full or part-time employment to those in both degree and non-degree programs. Academic training can be paid or unpaid. Paid academic training is normally performed after completion of studies. Unpaid academic training is a significant part of the academic program (e.g., required for the degree program). Paid and unpaid academic training can be used before or after the completion of the academic program.

You may participate in academic training during your studies or after your studies as long as the academic training begins no later than 30 days after completion of studies. The Responsible Officer (or Alternate Responsible) of the exchange-visitor program (the sponsor who issued the DS-2019) authorizes the academic training.

To receive academic training authorization, you must apply to your J-1 Responsible or Alternate Responsible Officer (RO/ARO, who represents your J-1 sponsor and issues your Form DS-2019. The RO/ARO, in conjunction with your financial sponsor (for paid academic training after completion of your studies), will evaluate the proposed employment to determine whether it can be authorized. If Gallaudet University sponsors your J-1, your RO/ARO is one of the advisors at the Office of Research Support and International Affairs (RSIA). If your program is sponsored by another institution, such as IIE, RSIA will direct you to the appropriate RO/ARO.

Eligibility

You are eligible for academic training if you meet the following criteria:

1. You must be in valid J-1 status and in good academic standing at the school named on your Form DS-2019.
2. Academic training must be done with a specific employer/training site.
3. The proposed employment must be directly related to your major field of study.
4. Written approval must be obtained in advance for the duration and type of academic training.
5. If your post-completion academic training will be unpaid, you must prove you have adequate financial support for yourself and J-2 dependents if any.

Duration of Academic Training

You can be authorized to participate in academic training for the length of time necessary to complete the goals and objectives of the training, provided that the amount of time for academic
training is approved by the academic dean or advisor (and your financial sponsor if seeking post completion academic training) and approved by the RO/ARO. For most exchange-visitor students there is a limit of 18 months; however, the number of months of academic training cannot exceed the number of months of study.

General limits which apply to all students:

- The duration of academic training may not exceed the length of the academic program, generally limited to 18 months.
- Part-time and full-time academic training are counted the same against the total time allowed. Part-time academic training is not counted at half the rate of full-time.
- Academic training used before completion of the academic program is deducted from the total time available.

Specific limits include:

- Non-degree students: An exchange student enrolled for one semester may be granted academic training for the equivalent time of his/her studies. Total J-1 program time for non-degree students is limited to 24 months, including both study and academic training time.
- Degree students: Academic training is normally limited to a maximum of 18 months.
- PhD students: Academic training may be available for 18 months prior to completion of studies and 18 months thereafter

Application Process:

You must receive academic training authorization before you begin employment. For authorization to work after the completion of your academic program, you must receive a job offer and apply to RSIA before your program completion date (although employment may begin later).

To apply for academic training, meet with a RSIA advisor and submit the following items:

1. A copy of the offer of employment (academic training) indicating the title and description of the position being offered.
2. J-1 Academic Training Recommendation & Request Form showing the following information:
   a. The goals and objectives of the specific training program;
   b. A description of the training program, including its location, the name and address of the training supervisor, number of hours per week, and dates of training;
   c. How the training relates to your major field of study and why it is an integral or critical part of your academic program.
3. Verification of health insurance.
If you meet the requirements for academic training, the RO/ARO will issue a letter authorizing your employment for a specified period of time, and, if applicable, issue a new DS-2019 form (post completion academic training). Please allow at least three business days for processing. Provide the employer on your first day on the job with copies of the authorization letter from RSIA and your DS-2019 form (if applicable).

**Travel Abroad and Reentry:**

If you plan to leave the US after completing your program of study and reenter the US for J-1 academic training, you must apply for work authorization with your RO/ARO before you leave. If you leave the US before applying for academic training, you have relinquished your ability to return to the USA in J-1 student status and obtain academic training work authorization.

A valid travel signature on your DS-2019 and valid visa stamp are required to reenter the US while on academic training. Consult your RO/ARO for more information about travel on academic training.

**Extending J-1 Academic Training Authorization**

If you are eligible for an extension of your academic training, please contact RSIA at least one month prior to the expiration of your current academic training authorization.

**Additional Information and Requirements:**

1. Please let us know if your dependents are in the US. They will also require updated DS-2019s.
2. RSIA is required to report in SEVIS any address changes for University-sponsored students, so you must continue to update your local address and other contact information while on academic training.
3. Throughout your period of academic training, you must maintain permission to stay in the US in J-1 student status and apply for extensions as necessary.
4. You must maintain health insurance coverage for yourself and any J-2 dependents throughout your academic training period.

**Failure to Comply with Employment Regulations**

It is your responsibility to comply with all immigration regulations which apply to J-1 students, including employment regulations. Working without proper authorization is a serious violation of your student status. If you fail to comply with your responsibilities, you may not be eligible for benefits normally granted to J-1 students and, in some situations, may be subject to deportation. *Prior to accepting any employment in the US, we strongly urge you to consult with RSIA.*
J-1 Student Academic Training Recommendation & Request Form

TO BE COMPLETED BY ACADEMIC ADVISOR OR DEPARTMENT CHAIR

Students Last Name: _________________________________ First Name: ___________________________

Major _________________________________________________ Degree: __________________________

Expected Date of Completion: ____________________________________________________________________

This student wishes to (please pick only one):

☐ Engage in academic training prior to completion of study
☐ Engage in academic training after completion of study (after the program completion date listed above)

DESCRIPTION OF THE TRAINING PROGRAM (attached job offer letter if applicable)

Job Title: _______________________________________________________________________________

Dates of the academic training program: ___________________________ to _________________________

Number of hours per week: ____________________

OBJECTIVES OF ACADEMIC TRAINING — how does this academic training opportunity relate to the
student’s study at Gallaudet University?

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

_______________________________________________________________________________________

As the student’s Academic Adviser or chair, I have set forth the nature and details of the academic training
program. I approve of the amount of time requested as necessary to complete the goals and objectives of the
training. With this letter, I recommend that you authorize this student to participate in the J-1 Academic
Training program that I have described above.

Name of Academic Advisor or Chair: _________________________________________________________

Signature: ___________________________ Date: ___________________________
J-1 Student Academic Training Recommendation & Request Form

TO BE COMPLETED BY J-1 STUDENT

Student’s name: ____________________________________________________ Date of Birth: __________
Prospective employers address: _____________________________________________________________
Name of the supervisor: ___________________________________________________________________

List all periods of previously authorized employment for Academic Training
_______________________________________  _______________________________________________
_______________________________________  _______________________________________________

Students current address: __________________________________________________________________
Phone: _______________________________ E-mail: ___________________________________________

Have you EVER been subject to the Two Year Home Residency Requirement? □ Yes □ No
If YES, have you applied for the waiver of the Requirement? □ No □ Yes (explain on separate sheet)

Statement of Understanding:

• I have maintained valid J-1 status since I began my study at Gallaudet University, including the
  health insurance requirements set by the US Department of State.
• I understand that I must report to RSIA any change to my name or address
• I understand that any changes to the terms and conditions of the approved academic training must
  be reviewed and approved by RSIA in advance.

Signature of Student: ________________________________ Date: ________________________________

INSTRUCTIONS: For Academic Training authorization, please meet with a RSIA advisor with the following:

• Completed Academic Training Recommendation/Request
• Copy of the offer letter (on letterhead with signature) stating:
  o Position title
  o Dates of employment
  o Complete Address of Academic Training (=employment) location
  o Number of work hours per week
  o Salary
  o Duties that you will perform
• Copies of your current and previous DS-201 9(s)
• Copies of passport pages (biographical data, photo, and expiration date)
• Copy of your current 1-94 card (front and back)
• Copy of any previously-issued Academic Training authorization letter(s)
J-1 Student Academic Training Recommendation & Request Form

TO BE COMPLETED BY J-1 STUDENT FINANCIAL SPONSOR

Students Last Name: ______________________________ First Name: _______________________

Major __________________________________________ Degree: __________________________

Expected Date of Completion: _______________________________________________________

To Financial Sponsor:

Your financially sponsored J-1 student above at Gallaudet University is requesting permission to engage in Academic Training after completion of his/her studies. Academic training is designed to allow J-1 students the opportunity to apply knowledge gained in the classroom to a practical work experience. It is available for full or part-time employment to those in both degree and non-degree programs. Academic training can be paid or unpaid. The training is a critical or integral part of the student’s academic program.

To participate in academic training, the student is applying for permission from you, the financial sponsor (for paid academic training after completion of studies).

Recommendation for Training

I have reviewed the information provided by the student above, as well as the attached letter of training offer.

As the financial sponsor, we recommend this request for training. □ Yes □ No

Signature: _______________________________ Date_____________________________

Full Name: ____________________________________________________________________

Position/Title: __________________________________________________________________

Address: _______________________________________________________________________

______________________________________________________________________________

E-mail: _______________________________________________________________________

Telephone: ___________________________ Fax: _______________________________
