

HOST DEPARTMENT CONFIRMATIONS

MICHIGAN STATE
UNIVERSITY

OFFICE FOR INTERNATIONAL STUDENTS AND SCHOLARS

Phone: 517.353.1720 | Fax: 517.355.4657

E-mail: oiss@msu.edu | Web: www.oiss.msu.edu

In hosting a J-1 Exchange Visitor (EV), there are certain responsibilities to be assumed by the host department to ensure the J-1 exchange visitor has adequate academic and logistical support.

EXCHANGE VISITOR NAME: _____

EXCHANGE VISITOR DATE OF BIRTH: _____

→ **FEE:** Is your department charging a fee to host this EV? Yes No
If yes, what is the amount you will charge to the EV? \$ _____ (Please note that OISS will charge your Department a processing fee of \$100 for Short-Term Scholars or \$350 for Research Scholars/Professors.)
Please provide your account number: _____ and sub-account number: _____

HOST FACULTY RESPONSIBILITIES

- I confirm I will engage in regular collaborative contact with the EV during the J-1 program and understand a minimum of monthly contact is required.
- I understand EVs are here primarily to engage in academic program activities other than course enrollment, so any course enrollment should be limited. Classroom / Seminar Participation may not exceed the following limitations:
- 9 clock hours per week of non-credit-bearing classroom activity; or
 - 6 hours of enrolled undergraduate credits per semester; or
 - 4 hours of enrolled graduate credits per semester.
- For those departments hosting J-1 Research Scholars or Professors ONLY: If the EV will be outside the US for 30 days or more during her/his J-1 program, and continue the MSU J-1 program engagement, I understand I must notify OISS prior to the scholar's departure from the US. This notification will allow OISS to maintain the J-1 record as active while the scholar is abroad.
- I understand that should an EV's appointment end and s/he is unable to find an alternative host arrangement, the EV will be required to leave the U.S.
- If an EV is not performing as expected, I will provide at least two weeks' notice prior to termination of the EV's assignment or appointment.
- If an EV completes her/his program more than 15 days prior to the scheduled end date of the J-1 program, I will notify OISS by sending a message to jvisas@msu.edu.

RESPONSIBILITIES SHARED BETWEEN HOST FACULTY AND HOST DEPARTMENT

- I understand the EV must enroll in Health Insurance upon arrival to the U.S. that will meet the J-1 requirements and that EV must provide proof of enrollment at time of check-in with OISS.
- I understand I need to provide regular and timely communication with OISS regarding any issues or concerns that arise and will encourage the EV to do the same.
- We are responsible for ensuring that the EV has access to sufficient information to make appropriate housing arrangements for themselves and any accompanying family members. (Host departments may choose to make these arrangements themselves.)
- We are responsible for ensuring the EV has access to sufficient information to arrange safe transportation from the airport to their lodging. (Host departments may choose to make these arrangements themselves.)
- We are responsible for helping the EV with an initial shopping trip to obtain immediately necessary supplies (i.e. towels, bedding, cooking supplies).
- We confirm we will provide the EV access to any necessary resources such as library facilities, course observation, and office resources.
- We will ensure the EV checks in with OISS as soon as possible after arrival.
- We will provide regular and timely communication with OISS regarding any issues or concerns that arise and will encourage the EV to do the same.
- If there are material changes to an EV's program (i.e. site of activity, change in supervisor, funding updates), we will immediately submit an Update Notification Form with supporting documents to OISS.
- Should we wish to extend an EV's program, we understand we are responsible for submitting the DS-2019 Extension Request to OISS

We confirm that the EV will not hold a tenure-track position while maintaining J-1 status

Faculty Name: _____

Faculty Title: _____

Host Department Name: _____

Faculty Signature: _____ **Date:** _____