J-1 Academic Training Information

Academic training is flexible in its format and offers a variety of employment situations to supplement your academic program in the United States. It is available before completing your program of study as well as afterward. As long as you stay within the stipulated time limits, it lets you work part time or full time while classes are in session and full time during vacation periods; and, under certain circumstances, you may interrupt your study to work full time, for example, while you are writing a thesis. J-1 students in non-degree programs are also eligible for academic training.

Conditions

- 1. Your primary purpose in the United States must be study rather than Academic Training
- 2. You must be in good academic standing
- 3. The proposed employment must be directly related to your major field of study
- 4. Throughout your academic training, you must maintain permission to stay in the United States in J-1 student status and apply for extensions as necessary
- 5. You must maintain health insurance coverage for yourself and any J-2 dependents throughout your academic training

Limitations

- 1. Your employment may be authorized for the length of time necessary to complete the goals and objectives of the training, provided that the amount of time is approved by both the academic dean or adviser and an immigration coordinator in the Office of International Affairs. PhD-level students may apply for up to 36 months of academic training. Bachelor's and master's level degree-seeking students in STEM fields may also apply for up to 36 months (currently only through the end of Spring Semester 2023). Bachelor's and master's level students in non-STEM fields and exchange students may apply for up to 18 months. Additional academic training beyond the 18 or 36-month limit is allowed only if it is **required for the degree**.
- 2. Part-time employment for academic training counts against the 18 or 36-month limit the same as full-time employment.
- 3. Earning more than one degree does not increase the amount of time for academic training.
- 4. Exchange visitors on academic training may complete no more than 40% of work remotely (e.g., no more than two out of five days per week).

Before Completion of Study

You may be authorized to work up to 20 and more than 20 hours per week before you complete your coursework under one of the two following conditions:

- 1. It is during a vacation term; or
- 2. You have completed all your course requirements and need only to complete a thesis or dissertation

After Completion of Study

- 1. Academic training approved **after** completion of your program of study must be reduced by any **prior** periods of academic training.
- 2. Academic training following completion of your program of study may be paid or unpaid employment. If **unpaid**, the student must be able to show adequate financial support and insurance coverage during the period of authorized employment.
- 3. Whether the other items in the application are ready yet or not, you must obtain a written offer of appropriate employment and present a copy to an immigration coordinator in the Office of International Affairs **no later than the end date of your program**, or you will **lose eligibility** for academic training after completion of studies.

Application Procedure

- 1. Obtain a letter of offer from your prospective employer that includes your job title, a brief description of the "goals and objectives" of your "training program" (your employment), the dates and location of the employment, the number of hours per week, and the name and address of your "training supervisor" (the quotations come from the regulations) and an annual salary rate. **Make sure that your employer's letter includes all of these details.** If you are unpaid, bring proof of finances (e.g., bank statement) and insurance to the Office of International Affairs along with your letter.
- 2. Give a copy of your employer's letter to your academic adviser or dean to complete the attached "Academic Advisor/Dean Recommendation" form.
- 3. Bring the letter of offer and recommendation from your academic adviser or dean to the Office of International Affairs and have an immigration coordinator review the material.
- 4. Upon approval, the Office of International Affairs will issue a new Form DS-2019 with the Academic Training approval/updates on it.
- 5. The U.S. Department of State requires all J-1 students and their dependents who accompany them to the United States to have health insurance during their entire stay in the United States. All Ohio State students and accompanying dependents must purchase the Ohio State health insurance plan or obtain appropriate insurance through their employer. Academic Training will not be approved until proof of insurance has been provided.

Documents Needed for Employment

When you begin work (as a paid employee), you and your employer must complete Form I-9, which requires you to document your identity and work authorization according to the directions on the back of the Form. Of the various items acceptable as documentation, you may find that the most convenient combination is your passport, Form I-94, Form DS-2019 and the Office of International Affairs work authorization letter. Your employer, who keeps Form I-9, will make copies of the documents you submit and return the originals to you. Form I-9 must be updated any time that you receive a renewal of your permission for academic training.

J-1 Academic Training Application

To Be Completed by the Student (Please Print)

Last Nam	ıe:	
First Nan	ne:	
Middle N	ame:	
SEVIS ID	Number: N00	Date of Birth (mm/dd/yyyy):
Phone: _		Primary Email:
Secondar	y Email:	
I am appl	lying for Academic T	aining based on the following information as it relates to my J-1 status:
Degree L	evel for which you w	ll be authorized for Academic Training:
	Bachelor's Master's	□ PhD □ Other:
During m	ıy Academic Training	I will be/have:
□ E	inrolled full time and Completed all course Completed or am expe	wacation term during summer
Have you	applied for a waiver	of the 212(e) two-year foreign residence requirement?
		are not eligible to extend your DS-2019 with Academic Training.
in Acader address, the respo amended frauduler hold Ohio	mic Training, I will untelephone number and insibilities associated while I am maintain it, my J-1 exchange wo State liable for failu	mation I have provided in this application is accurate. While participating date my student account in SIS with any changes to my residential d email address within 10 days of such changes. I understand and agree to with Academic Training even in the event that Federal Regulations are ng my J-1 non-immigrant status. I understand that if my statements are sitor program will be terminated by The Ohio State University. I will not be to comply with the Department of State's insurance requirements.
Signature of Student: Date (mm/dd/yyyy):		

To Be Completed by the Academic Advisor or Department Cha	air (Please Print)		
Field of Study:			
Estimated Semester and Year of Student's Completion of Studies:			
Description of Training Program			
Job Title:			
Employer Name:			
Employer Address (No P.O. Boxes):			
City: State:	Zip Code:		
Name of Training Supervisor:			
Work will be performed: ☐ in person at employer's address *No more than 40% of work may be performed remotely.	□ remotely* □ hybrid*		
Dates of Training Program (mm/dd/yyyy): From	to		
Number of Hours per Week: Annual Salary Rate \$			
Goals and Objectives of the Specific Training Program			
How does the training program relate to the student's major field of	study?		
Why is the training an integral or critical part of the academic progra	am of the exchange student?		

Office of International Affairs

International Students

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 "Academic Training" program that I have described. Signature of Academic Advisor: ______ Date (mm/dd/yyyy): _____ Printed Name and Title of Academic Advisor: College or Department: To Be Completed by the Immigration Coordinator (Please Print) I have reviewed this letter and determined that the "Academic Training" being requested: ☐ is warranted ☐ is not warranted The criteria and time limitations set forth in 22 CFR 514.23(f) (3) & (4): ☐ are satisfied ☐ are not satisfied To ensure the quality of the program, I hereby evaluate the effectiveness and appropriateness of the training in achieving the stated goals and objectives as follows: ☐ Satisfactory ☐ Unsatisfactory I have authorized academic training from (mm/dd/yyyy) _______ to _____

Printed Name of Immigration Coordinator: _____

Signature: _____ Date (mm/dd/yyyy): _____

As the student's Academic Advisor, I have set forth the nature and details of the academic training