

Out-of-Country Request for DS2019

Released on April 18, 2008, SEVIS introduced an "Out-of-Country" functionality that allows the professor or research scholar participating in his/her exchange program to be outside the United States for a scheduled period of time. The DS2019 and SEVIS record remain "Active" during this time period. Use of the "Out-of-Country" functionality is at the discretion of the program sponsor.

Out-of-Country Request:

Family Name _____ First Name _____

KUMC Department _____ Position Title: _____

J-1 status ends on _____ Proposed Out-of-Country dates: _____ to _____
(MM/DD/YY) (MM/DD/YY) (MM/DD/YY)

Purpose/Activities planned while outside the US? _____

Site of Activities: _____

City: _____ Country _____

Out-of-Country Residence: _____
City _____ Province/State _____
Country _____ Zip Code _____

Non-KUMC email address: _____

Will your dependents accompany you or will they remain in the United States? _____

Attestation of Compliance

I understand that as a J-1 Exchange Visitor I must continue to maintain my status and comply with the regulations of the Exchange Visitor program. I understand that I must:

- 1) Maintain a non-KUMC email address and communication with the Office of International Programs.
- 2) Report any changes in my address, plans, or status to the Office of International Programs.
- 3) Maintain and provide verification of health and medical evacuation and repatriation insurances to the Office of International Programs. I must maintain this coverage even while I am not in the United States.
- 4) Report to the Office of International Programs any changes in: purpose, activities, or dates as indicated in this request form.

If I fail to maintain status, my SEVIS file and DS2019 may be inactivated compromising my ability to participate in the Exchange Visitor program and return to the United States.

Signed _____ Date _____

During this absence the employee will: (check all that apply)

- Be on approved leave of absence with pay
- Be on approved leave of absence without pay
- Be terminated effective _____
(date)

- Be rehired upon return to the US into the same position/department
- Be hired into a different position/department (provide details on separate page)
- Be eligible for benefits (ie health insurance)
- Have a KUMC email address

Are there any restrictions or conditions which would keep the employee from returning to their current position (example: funding)?

DEPARTMENT STATEMENT OF RESPONSIBILITY AS SPONSOR OF EXCHANGE VISITOR

1. As sponsor of the Visitor, I accept responsibility for the accuracy of all information contained in this form.
2. I support the exchange visitors request to be “out-of-country” for the purpose and dates indicated on this request form.
3. I will notify the OIP if there is any change in the proposed plan or dates.
4. I will notify the OIP if there is a cancellation of plans for the Visitor to return to KUMC.

KUMC supervisor

Signature _____ Date _____

Supervisor's Name _____
(type or print)