

# WAYNE STATE UNIVERSITY

## OFFICE OF INTERNATIONAL STUDENTS & SCHOLARS

### Why Wayne State?

With 350 degree programs, including education, business administration, social work, engineering, nursing, pharmacy and health sciences and fine, performing and communication arts, an internship in your degree program is a real possibility.

Located on a beautiful 200 acre campus in the heart of Detroit's cultural center, we are minutes away from art museums, orchestra halls and sporting venues.

Wayne State services a student population of 30,000 students coming from over 100 countries.



### Office of International Students & Scholars

42 West Warren  
Suite 416  
Detroit MI 48202  
Phone: 313-577-3422  
Fax: 313-577-2962  
E-mail: [j1intern@wayne.edu](mailto:j1intern@wayne.edu)

### J-1 Internship Opportunities



42 West Warren  
Suite 416  
Detroit, MI 48202  
Tel: 313-577-3422  
[www.oiss.wayne.edu](http://www.oiss.wayne.edu)

# Aim Higher



Gain International Experience with a J-1 Internship

## WELCOME

The Office of International Students and Scholars (OISS) is the primary international student and scholar support administrative unit at Wayne State University responsible for supporting the international student and scholar community.

OISS provides a broad array of services and programs aimed at meeting the unique needs of international students throughout their academic program at the University

## PURPOSE

A J-1 Internship allows students outside the United States to participate as an Intern in the U.S. related to the degree objective they are pursuing in their home institution. Students can obtain a maximum of 12 months experience for each degree they are pursuing

## CONDITIONS

- Student must be in good standing in their home educational institution
- Available to currently enrolled undergraduate or graduate students;
- Or students who have graduated no more than 12 months prior to the start date of the internship.



Put your education to work.

## BENEFITS

There are a number of benefits that can be gained through a J-1 Internship. Those benefits include:

- Internship experience at a leading U.S. research institution
- Wayne State is a comprehensive university with 13 colleges and schools. We offer more than 350 academic programs, including 126 bachelor's degree programs, 139 master's degree programs, 60 doctoral degree programs and 30 certificate, specialist and professional programs
- Wayne State holds the prestigious Carnegie RU-VH classification, a designation held by only 3.6% of US institutions

## Benefits Continued

- Wayne State University School of Medicine is the largest single-campus medical school in the nation with more than 1,000 medical students
- Exposure to state of the art facilities
- Every Internship program provides a unique opportunity. The experience you will receive will give you a great start in your field of study

## HOW TO GET STARTED

If your institution is interested in receiving more information about the internship opportunities at Wayne State University, please send an email [j1intern@wayne.edu](mailto:j1intern@wayne.edu)

Be sure to include:

- Name of your Institution
- Field of study your student is pursuing
- Month you would like your student's internship to begin

## J-1 Intern Program Fact Sheet

### U.S. Department of State Exchange Visitor Program Trainees and Interns

Federal Register / Vol. 72, No. 117/Tuesday, June 19, 2007/Rules and Regulations

**The J-1 Intern Category allows WSU Departments to sponsor foreign national students to participate in a 12 month internship. Below are some important facts on the eligibility and requirements:**

- ◆ The student is currently enrolled in and pursuing studies at a degree-or certificate-granting post-Secondary Academic institution in their home country;
- ◆ The U.S. internship must fulfill the educational objectives for his or her current degree program at his or her home institution;
- ◆ The student must be "in good academic standing" at his or her home institution outside the United States;
- ◆ The student must be primarily in the United States to engage in a student internship program rather than to engage in employment or provide services to an employer;
- ◆ Students can participate who have graduated from such an institution **no more than 12 months prior to their Exchange visitor program begin date to participate in an internship program**;
- ◆ The student must be accepted into a student internship program at the postsecondary accredited academic institution listed on his or her Form DS-2019;
- ◆ Sponsors must ensure that Interns have verifiable English language skills sufficient to function on a day-to-day basis in their program environment;
- ◆ Have sufficient finances to support himself or herself and dependants for their entire stay in the United States, including housing and living expenses;
- ◆ The student must return to his or her academic program outside the United States and fulfill and obtain a degree from such academic institution after completion of the student internship program.

#### **Other important facts:**

- ◆ The Office of International Students and Scholars is the administrator of this program. All Internship requests will be coordinated by OISS.
- ◆ There are strict training plans and evaluations that must be completed and submitted to OISS for compliance with the regulations.

### Other Important Facts (Cont'd.)

The internship activity secured for the participant must conform to these requirements and prohibitions:

#### Duration

The internship must be full-time; i.e., consist of a minimum of 32 hours per week. [22 C.F.R. § 62.23(i)(3)(i)(A)]

Student Interns may participate in a student internship program for "up to 12 months for each degree/major." [22 C.F.R. § 62.23(h)(3)] Extensions beyond 12 months are not possible.

#### Focus and nature of activity

- ◆ The internship does not have to be in the student's field of study, but it does have to "fulfill the educational objectives for his or her current degree program at his or her home institution." [22 C.F.R. § 62.23(i)]
- ◆ All tasks assigned must be "necessary for the completion of the student internship program." [22 C.F.R. § 62.23(i)(8)(iv)]
- ◆ A student may participate in an internship with or without wages or other compensation, and full-time employment is permitted, as outlined on the student's T/IPP. To be employed, however, the student needs the "approval of the exchange program's responsible officer and the student's home institution's dean or academic advisor." [22 C.F.R. § 62.23(i)(6)]
- ◆ The internship tasks may consist of no more than 20 percent clerical work. [22 C.F.R. § 62.23(i)(8)(iv)]
- ◆ The internship must expose the participant to "American techniques, methodologies, and technology," expand upon the participant's existing knowledge and skills, and "not duplicate the student Intern's prior experience." [22 C.F.R. § 62.23(i)(2)(iii)]
- ◆ Internships cannot place a student Intern in any position that involves the following [22 C.F.R. § 62.23(i)(8)(i)]:
  - Unskilled or casual labor
  - Child care or elder care
  - Aviation
  - Clinical positions or engaging in any other kind of work that involves

patient care or contact, including any work that would require student Interns to provide therapy, medication, or other clinical or medical care (e.g., sports or physical therapy, psychological counseling, nursing, dentistry, veterinary medicine, social work, speech therapy, or early childhood education)"

- Any "position, occupation, or business that could bring the Exchange Visitor Program or the Department into notoriety or disrepute." [22 C.F.R. § 62.23(i)(8)(ii) ]

### **Distinction between internships and regular employment**

- ◆ The internship cannot "serve to fill a labor need" [22 C.F.R. § 62.23(i)(3)(ii)(B) ]
- ◆ The internship must exist "solely to assist the student Intern in achieving the objectives of his or her participation in a student internship program." [22 C.F.R. § 62.23(i)(3)(ii)(B) ]
- ◆ The internship must consist of "work-based learning," rather than "ordinary employment or unskilled labor." [22 C.F.R. § 62.23(i)(7)(i) ]
- ◆ Not involve in any way a "staffing/employment agency." [22 C.F.R. § 62.23(i)(8)(iii) ]

### **Worker protections**

- ◆ The internship cannot displace "American workers" (including full or part-time, temporary or permanent). [22 C.F.R. § 62.23(i)(3)(i)(B) ]
- ◆ If in the field of agriculture, the internship must meet all requirements of the Fair Labor Standards Act and the Migrant and Seasonal Agricultural Worker Protection Act. [22 C.F.R. § 62.23(i)(3)(ii)(C) ]

### **Occupational Categories for J-1 Internship Program**

**Federal Register** 3913, January 24, 2006);

Construction and Building Trades; Education, Social Sciences, Library Science, Counseling and Social Services; Health Related Occupations; Hospitality and Tourism; Information Media and Communications; Management, Business, Commerce and Finance; Public Administration and Law; and the Sciences, Engineering, Architecture, Mathematics, and Industrial Occupations; and such other occupational categories that the Department may from time to time include in training and internship programs.

## J1 Intern – Department Steps and Basics

Effective July 2008, the Department of State has introduced a new category called the J Intern. The J student Intern is a foreign national enrolled and pursuing a degree at an accredited post secondary institution outside the United States and participating in an internship program in the United States that will fulfill the educational objectives for his/ her current degree program at his/her home institution.

### Step One:

#### Preliminary Steps in Preparing to Receive an Intern

1. Department will contact OISS to inform them they are interested in an Intern
2. Department will appoint WSU professor to be the primary supervisor for the Intern
3. The department will obtain all the necessary information regarding the recruitment of a Intern

### Step Two:

#### Preparation of Documents to Submit DS2019 Request to OISS

1. The WSU professor will ascertain that the internship is a requirement towards a degree in the home institution and evidence will be obtained by reviewing the curriculum.
  - A. Obtain evidence from the foreign institution that the student is currently enrolled and pursuing a degree in the home institution (see attached letter)
  - B. Obtain proof that the internship is a requirement at their home institution
  - C. If the internship requires employment, the home institution will issue written authorization for employment at WSU (see attached letter)
2. WSU professor will conduct and interview with the candidate to evaluate the English language proficiency and conduct a personal (or telephone) interview of the Intern. In most cases, this interview must be conducted by the WSU professor. U.S. law requires a personal interview with the prospective Intern to discuss the internship and evaluate the Intern's background and knowledge.
  - A. This interview will normally be conducted by the WSU professor, and may be in person, by video or web camera, or by telephone. (An E-mail "interview" is not sufficient). WSU Host Professor will complete and sign the English Language Proficiency Form.
  - B. In some cases, this interview may be conducted by a representative of the Intern's current academic institution. In this case, there must be a written contract or agreement between WSU and the Intern's home institution. A copy of this written agreement must be attached to the Interview Report Form. The Interns' English language Instructor at his/her home institution or at an English Language School.
  - C. The Intern may send a copy of a TOEFL score meeting the requirement of the WSU Admissions Office.
3. The department will provide an invitation letter for the internship, if employment is involved an appropriate offer letter will be provided.
4. WSU professor will complete the DS-7002 Training/Internship Placement Plan Form Pages 1 and 2 of this form must be completed by the host professor, after discussing the internship plans with the prospective Intern. After both pages are completed, the form must be signed by the host professor\* (in the line marked "Supervisor's Signature") and by the Intern (on the line marked "Trainee/Intern Signature"). A fillable version of this form is available at: <http://www.state.gov/documents/organization/84240.pdf>

#### Specific Instructions:

- o Check "Intern" (not Trainee).

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## Office of International Students and Scholars

- If the U.S. residential address and telephone are not yet known, give the department address and phone.
  - Since the internship will be conducted by WSU, for “Host Organization” write “Wayne State University, Department of \_\_\_\_\_.”
  - On Pages 1 and 2, do not complete the sections marked “Sponsor’s Signature” or “Program Sponsor Name.”
  - Complete all other questions on Page 2 in detail. This is the statement of learning objectives and activities for the internship and is extremely important. If there is more than one “phase” to the internship, a separate Page 2 must be completed for each phase. If the same activity will last for the whole internship, start and end dates for the “phase” will be the start and end date of the internship.
5. Both Pages 1 and 2 should be completed and sent to the Intern BEFORE she/he signs. The form (without, and then with) the Intern’s signature can be faxed or scanned, instead of mailed, to save time
  6. Department will complete Part A of the DS 2019 Request Form
  7. Department will obtain part b of the DS 2019 request from the Intern along with copy of the passport, proof of financial documents and documents of dependents, if applicable
  8. Depart will process an IRB for \$150.00
  9. Department will submit all of the above documents for the DS2019 request to OISS:

### Step Three:

#### Department Responsibility after DS2019 is processed

1. Department will pick-up from OISS the DS2019 form and instructions to mail to the Intern
2. The department is responsible to notify OISS of a delay in the arrival of the Intern
3. Department will submit the midpoint and final internship evaluation forms to OISS

## J-1 INTERN APPLICATION CHECKLIST

Intern's Name: \_\_\_\_\_

- IRB processing fees \$150
- OISS DS-2019 Request Forms (Part A & B)
- DS-7002 completed by host professor
- Copy of Wayne State University's Letter of Offer of employment
- Letter of invitation from department
- Responsibilities of J-1 Intern Professor- Department
- Proof of English proficiency
- Copy of his/her passport
- Letter from home institution verifying their academic standing
- Proof of current enrollment at home institution
- Transcripts
- Home institution authorization for employment
- Proof of financial document, if funded other than WSU
- Number of dependent(s) accompanying J-1 scholar \_\_\_\_\_, Dependent's passport, marriage certificate, birth certificate)
- Completed midterm and final evaluation (as applicable)

**\* Please allow 10 business days for processing.**

**\* In certain cases, such as transfer, amendment, etc., we will require more documentation/information. Please note that it could take more than 10 days for processing as coordination with another J-1 sponsor might be needed.**

**J-1 Form DS-2019 Request: To Be Completed by WSU Host Department/ Professor of the Intern**

Name of Intern: \_\_\_\_\_  
Family Name Given Name Middle Name

Banner ID/WSU ID: \_\_\_\_\_ WSU Host Department: \_\_\_\_\_

Department Address: \_\_\_\_\_ Department Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**PURPOSE OF THE FORM (CHECK ALL THAT APPLY):**

- Initial DS-2019
- Does the Intern have adequate English skills to complete the program?  Yes  No
- Date of Interview to assess English language skills: \_\_\_\_\_
- Will components of Intern's program take place off the WSU campus?  Yes  No  
If yes, please note address \_\_\_\_\_
- Will the Intern be paid by of through WSU?  Yes  No  
If yes, how much \$ \_\_\_\_\_ per  Month  Year
- The applicant is overseas and will be applying for a U.S. visa abroad
- The applicant is in the U.S. in another immigration category and will apply for change of status
- The applicant is currently in J-1 status at another U.S. institution and will transfer to WSU
- The applicant is currently with another WSU department and wish to transfer to our department
- Extension of current appointment without change
- Facilitate entry of spouse and/or children to the U.S.
- Replacement Form DS-2019
- J-1 Internship
- Other \_\_\_\_\_

**WSU POSITION INFORMATION**

Title: \_\_\_\_\_ Internship Dates: from \_\_\_\_\_ to \_\_\_\_\_  
month/day/year month/day/year

Hours/Week: \_\_\_\_\_ Will Intern receive a stipend?  Yes  No If so, how much? \$ \_\_\_\_\_ per \_\_\_\_\_

J-1's Site of Activity: \_\_\_\_\_ including Zip Code

**FUNDING INFORMATION**

During the period of appointment, financial support for this visitor will be provided by one or more of the following. *Written evidence is required*, such as a letter of offer, a letter from an appropriate government agency, a bank certificate, etc.

*NOTE: Government funds made available for a specific research goal or to the principal research investigator and not for the use of supporting an exchange visitor or exchange program, should be designated as funds from Wayne State University.*

- Wayne State University \$ \_\_\_\_\_
- U.S. Government Agency(ies) \_\_\_\_\_ \$ \_\_\_\_\_  
name(s)
- The Exchange Visitor's Government \_\_\_\_\_ \$ \_\_\_\_\_  
name(s)
- Int'l Organization(s) \_\_\_\_\_ \$ \_\_\_\_\_  
name(s)
- Other Organization(s) \_\_\_\_\_ \$ \_\_\_\_\_  
name(s)
- Personal Fund \$ \_\_\_\_\_

**NEW! ATTESTATION** (by the supervisor – please read and sign below the statement if agreed)

I understand that the J-1 exchange visitor category was developed to implement the Mutual Educational and Cultural Exchange Act (Fulbright-Hayes Act) of 1961. The purpose of that Act, which is also the objective of the Exchange Visitor category, is to "increase mutual understanding between the people of the U.S. and the people of other countries by means of educational and cultural exchanges." I attest that this prospective scholar's visit is within the J-1 program objective, and that I am not utilizing the J-1 category for employment purposes.

Name of Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(If not signed, the application will not be processed.)

## J-1 Form DS-2019 Request: To Be Completed by the Intern

Name of the Intern: \_\_\_\_\_  
Family Name
Given Name
Middle Name

Gender:  Male  Female    Check here if you have previously attended WSU as a  Scholar  Student.

Check here if you have previously visited the U.S. If checked, please explain in detail on the back of the form.

Check here if you have applied for a **waiver** of the Two Year Home Country Physical Presence requirement. If so, please explain in detail on the back of the form.

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Month/day/year
City
Country

Country of Citizenship: \_\_\_\_\_ Country of Permanent Residence: \_\_\_\_\_

Level of Degree: \_\_\_\_\_ No. of Years Completed: \_\_\_\_\_

Field of Study: \_\_\_\_\_ Name of the Institution: \_\_\_\_\_

Foreign Address: \_\_\_\_\_

U.S. Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

***If you are already in the United States, please indicate your current immigration status (F-1, J-1, H-1B, etc.):***  
 \_\_\_\_\_ ***(please attach a copy of your current immigration documents, such as DS-2019, I-20, I-94 Card, I-797 Notice, etc.)***

Date First Entered U.S. as J-1: \_\_\_\_\_ I-94 #: \_\_\_\_\_

SEVIS ID#: \_\_\_\_\_

If your family (spouse and/or children under 21 years of age) will accompany you to the United States, please complete the box below. If the country of citizenship and the country of permanent residence are different, please put the country of permanent residence in parenthesis.

Name (Family, Given) & Relationship	City of Birth	Country of Birth	Date of Birth (mo/day/yr)	Gender (male or female)

**INSURANCE STATEMENT** (Please read and sign the following statement).

I understand that, per the requirement from the U.S. Department of State, during my period of appointment at Wayne State University as a J-1 Exchange Visitor, I must comply with the Department of State (DOS) regulations which require that I purchase health insurance for myself and my accompanying J-2 dependents (spouse and children), if applicable, throughout the duration of my/our visit in the U.S. I understand that failure to comply with this requirement will result in termination from the Exchange Visitor Program at Wayne State University.

\_\_\_\_\_  
Signature Date

**MAIL OR SEND THIS SHEET AS AN E-MAIL ATTACHMENT TO YOUR HOST DEPARTMENT AT WAYNE STATE UNIVERSITY. BE SURE TO INCLUDE A COPY OF YOUR PASSPORT, RESUME PROVING ATTAINMENT OF A BACHELOR'S DEGREE OR HIGHER IN A RELATED FIELD, I-94 CARD (IF ALREADY IN THE U.S.), DS-2019S/IAP-66S (IF HAVE ANY) AND VERIFICATION OF FINANCIAL SUPPORT (IF WILL BE NOT FUNDED BY WAYNE STATE).**



# TRAINING/INTERNSHIP PLACEMENT PLAN

<b>Check one:</b> <input type="checkbox"/> Trainee  <input type="checkbox"/> Intern	Occupational Field		Number of Years of Experience
	Level of Degree	Date Awarded (mm-dd-yyyy)	Field of Study

### PARTICIPANT INFORMATION

Trainee/Intern Name (Last, First, MI)		U.S. Residence Address	
U.S. Telephone Number	FAX Number	Email Address	

### SITE OF ACTIVITY INFORMATION

Host Organization		Address	
Supervisor's Name (Last, First, MI)		Email Address	
Phone Number	FAX Number	Supervisor's Title	
Dates of Program (mm-dd-yyyy) From _____ To _____		Hours Per Week	Will Trainee/Intern receive a stipend? <input type="checkbox"/> Yes <input type="checkbox"/> No
			If so, how much? \$ _____ per _____

### CONTRACT AGREEMENT

**NOTE-** Sponsors will not approve any contracts, and Trainees/Interns may not begin their programs until both a Training/Internship Placement Plan (page 2) and proof of required insurance that meets 22 CFR 62.14 is on file with the sponsor.

**Trainee/Intern-** I hereby acknowledge, understand and agree to the attached Training/Internship Placement Plan.

Trainee/Intern Signature	Date (mm-dd-yyyy)
--------------------------	-------------------

**Supervisor-** I certify that I will provide on-site supervision and that this training/internship is known and approved by this company/business or organization (*site of activity*). I will ensure that the required insurance is in place that meets 22 CFR 62.14 and provide the sponsor with written evaluations of the trainee/intern's performance, including the number of hours performed, the type of training, and the quality of the performance. At minimum, I will submit the evaluation at the mid-point and end of the program.

Supervisor's Signature	Date (mm-dd-yyyy)
------------------------	-------------------

**Sponsor-** I approve the attached Training/Internship Placement Plan. I certify the following:

1. Sufficient planning, equipment, and trained personnel will be dedicated to provide the training/internship specified;
2. The training/internship program is not designed to recruit and train aliens for employment in the United States;
3. Trainees/Interns will not displace full-time or part-time U.S. employees; and
4. That training and internship programs in the field of agriculture meet all requirements of the Employment Relationship under the Fair Labor Standards Act and the Migrant and Seasonal Agricultural Worker Protection Act (29 CFR Part 500).

I understand that false certification may subject me to criminal prosecution under 18 U.S.C. 1001, which reads: "Except as otherwise provided in this section, whoever, in any matter within the jurisdiction of the executive, legislative, or judicial branch of the Government of the United States, knowingly and willfully falsifies, conceals, or covers up by any trick, scheme, or device a material fact; makes any materially false, fictitious, or fraudulent statement or representation; or makes or uses any false writing or document knowing the same to contain any materially false, fictitious, or fraudulent statement or entry; shall be fined under this title or imprisoned not more than 5 years, or both."

Sponsor's Signature (RO/ARO)	Date (mm-dd-yyyy)
Program Sponsor Name	Program Number

Program Sponsor Name	Program Number
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**TRAINING/INTERNSHIP PLACEMENT PLAN**

An acceptable Training/Internship Placement Plan should cover a definite period of time and should consist of definite phases of training or tasks performed with a specific objective for each phase. The plan must also contain information on how the trainees/interns will accomplish those objectives (*i.e. classes, individual instruction, shadowing, etc.*). Each phase must build upon the previous phase to show a progression in the training/internship. A separate copy of page 2 must be completed for each phase if applicable (*i.e., if the trainee/intern is rotating through different departments*).

Name of Trainee/Intern ( <i>Last, First, MI</i> )	Field of Training/Internship
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Name of Phase	Start Date for this Phase _____ <i>(mm-dd-yyyy)</i>	End Date for this Phase _____ <i>(mm-dd-yyyy)</i>	Phase _____ of _____
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Specific Objective for This Phase

Skills to be Imparted for This Phase

Justification for On-The-Job Training

Chronology or Syllabus of Training or Tasks Performed During This Phase

Method of Evaluation and the Frequency of Supervision During This Phase

## Responsibilities of a J-1 Intern Sponsoring Department/Professor

Sponsoring Professor: \_\_\_\_\_ Department: \_\_\_\_\_

Intern: \_\_\_\_\_

### Department Responsibilities:

The sponsoring department is responsible to provide cultural and professional exchange opportunities for the visiting Intern.

### English Language Skills

Sponsors must ensure that Interns have verifiable English language skills sufficient to function on a day-to-day basis in their internship environment. English language proficiency must be verified by through an interview conducted by the sponsoring department.

The department contact should check the following boxes:

- I confirm that the internship program will engage the student Intern for a minimum of 32 hours per week.
- I confirm that the internship program will require no more than 20% clerical duties.
- The host department has confirmed the prospective Intern's English proficiency through the following means (check the appropriate circle):
  - We have conducted a telephone or in-person interview in English and have determined that the Intern is adequately proficient in the English language.
  - The Intern has taken a recognized English test and meets the minimum standard for WSU provisional admission.
  - The Intern has undertaken and passed an English language curriculum. (Letter from academic institution or English language school must accompany this application.)

### Training/Internship Placement Plan

([T/IPP](#) or [Form DS-7002](#)) must be completed and signed by ISFS, Sponsoring Department and the potential Intern before the Intern may apply for a visa. \*Note: Intern's program must be **full-time** (minimum of 32 hours per week).

### Mandatory Visa Check-In

DOS requires that all J-1 visitors check in with ISFS within 30 days of their program start date. If the Intern does not check in within this time, DOS will terminate the Intern's status and the Intern will not be eligible to engage in his/her program at OSU or to legally remain in the US. **If the Intern will be unable to check in with ISFS within 30 days of their start date the department agrees to notify ISFS to protect the visa status of incoming Intern.**

### Employment Restrictions

DOS approves the J-1 Exchange Program for the specific department, Training/Internship Program Plan, and dates listed on the initial J-1 Intern application. The Intern is NOT authorized to change programs without authorization from ISFS; this restriction includes interning in a different department within OSU or changing internship duties. If there is a change in the training plan for the Trainee Intern, the department should notify ISFS immediately.

### Evaluations

All evaluations must be completed prior to the conclusion of the internship program. Programs exceeding 6 months in duration require midpoint and concluding evaluations. Programs of six months or less require concluding evaluations only. Sponsoring professors must be current on

evaluations for all Interns under their sponsorship to have J-1 applications processed for a new Intern.

**Extensions of the Program**

Extensions are not possible beyond the 12 month maximum program participation set by the Department of State. If an extension request is made on behalf of the Intern, a completed Intern Evaluation must be submitted with the request for program extension along with a new T/IPP form.

**Notice of Departure**

Sponsoring professors and Interns are responsible to notify ISFS of the Intern's departure at the completion of the program. If the Intern's program is not properly closed with immigration it could lead to complications for the Intern in future visits to the United States.

**I hereby certify that I have read the "Responsibilities of a J-1 Intern Sponsoring Department/Professor" and agree to fulfill all requirements.**

**Professor's Signature** \_\_\_\_\_

**Date** \_\_\_\_\_





Office of International Students and Scholars

English Proficiency Form  
For Prospective J-1 Intern

If the required interview was conducted in English by the WSU host professor, this form can be filled out by the same person (section 1). Otherwise, the English Proficiency Form may be completed by an English Instructor at an academic Institution or an English Language School (Section 2). A third option is to attach a copy of a TOEFL score which would satisfy WSU undergraduate admission requirements.

Name of Intern \_\_\_\_\_

English proficiency is documented by the following (check at least one)

- Section 1 is completed and signed by WSU host professor after completing interview in English
- Section 2 is completed and signed by an English teacher
- TOEFL score is attached

Section 1 Certification by WSU Host Professor

I certify that I conducted an interview in English with this prospective Intern on \_\_\_\_\_  
Date

I feel that his/her English is adequate for the proposed internship.

\_\_\_\_\_  
Signature Name of WSU Host Professor Date

Section 2 Certification by English Teacher

I am/was the English Instructor of the student/Intern named above

from \_\_\_\_\_ to \_\_\_\_\_.

I feel that he/she can speak and understand English well enough to function on a day-to-day basis in an English-speaking work environment.

\_\_\_\_\_  
Signature Name (Printed) Date

\_\_\_\_\_  
Title Name of Institution Email Address

## J1 Intern Mid-Point Evaluation

NAME OF INTERN \_\_\_\_\_

INTERN SIGNATURE DATE \_\_\_\_\_

FACULTY SUPERVISOR SIGNATURE \_\_\_\_\_

DATE (MM/DD/YY) \_\_\_\_\_

*How well do you feel the Intern is accomplishing the overall goals for the training program at this point in his/her training? (rating scale excellent= 5, poor= 1, circle the number that describes how you feel)*

- |  |           |            |              |      |    |    |
|--|-----------|------------|--------------|------|----|----|
| 1. An understanding of the process for conducting research as outlined in his/her training program | 5         | 4          | 3            | 2    | 1  | NA |
| 2. An understanding of the safety and ethical issues in conducting research                        | 5         | 4          | 3            | 2    | 1  | NA |
| 3. Practical experience in conducting research   | 5         | 4          | 3            | 2    | 1  | NA |
| 4. Experience in the work environment of an academic research institution in the U.S.              | 5         | 4          | 3            | 2    | 1  | NA |
| 5. How well is the Intern acquiring the knowledge required for his/her training program?           | Very well | Adequately | Inadequately | NA   |    |    |
| 6. How well is the Intern developing the skills required for his/her training program?             | Very well | Adequately | Inadequately | NA   |    |    |
| 7. How dependable is the Intern in accomplishing tasks, being on time for work, etc.?              | Excellent | Good       | Fair         | Poor | NA |    |
| 8. How is the Intern's attitude toward his/her work?   | Excellent | Good       | Fair         | Poor | NA |    |
| 9. How is the Intern's English proficiency? (if applicable)  | Excellent | Good       | Fair         | Poor | NA |    |

COMMENTS:

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## J1 Intern Final Evaluation

NAME OF INTERN \_\_\_\_\_

INTERN SIGNATURE DATE \_\_\_\_\_

FACULTY SUPERVISOR SIGNATURE \_\_\_\_\_

DATE (MM/DD/YY) \_\_\_\_\_

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*How well do you feel the Intern is accomplishing the overall goals for the training program at this point in his/her training? (rating scale excellent= 5, poor= 1, circle the number that describes how you feel)*

- |  |           |            |              |      |    |    |
|--|-----------|------------|--------------|------|----|----|
| 1. An understanding of the process for conducting research as outlined in his/her training program | 5         | 4          | 3            | 2    | 1  | NA |
| 2. An understanding of the safety and ethical issues in conducting research                        | 5         | 4          | 3            | 2    | 1  | NA |
| 3. Practical experience in conducting research   | 5         | 4          | 3            | 2    | 1  | NA |
| 4. Experience in the work environment of an academic research institution in the U.S.              | 5         | 4          | 3            | 2    | 1  | NA |
| 5. How well is the Intern acquiring the knowledge required for his/her training program?           | Very well | Adequately | Inadequately | NA   |    |    |
| 6. How well is the Intern developing the skills required for his/her training program?             | Very well | Adequately | Inadequately | NA   |    |    |
| 7. How dependable is the Intern in accomplishing tasks, being on time for work, etc.?              | Excellent | Good       | Fair         | Poor | NA |    |
| 8. How is the Intern's attitude toward his/her work?   | Excellent | Good       | Fair         | Poor | NA |    |
| 9. How is the Intern's English proficiency? (if applicable)  | Excellent | Good       | Fair         | Poor | NA |    |

COMMENTS:

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