



XAVIER UNIVERSITY OF LOUISIANA
Office of International Education
1 Drive, Box 127
New Orleans, Louisiana 70125-1098
(504) 520-5491; Fax: (504) 520-7920

REQUEST FOR THE EXTENSION OF AN EXCHANGE VISITOR (J-1 STATUS)

Instructions: Complete this form, obtain necessary signatures and return to Office of International Education, by email via international@xula.edu, or a hard copy to St. Joseph Resource Center, Room 312.

Full Name of Exchange Visitor:

Title of Position:

Department:

Extensions may be granted 1) if necessary to complete the specified research or teaching objective as stated on the original form DS-2019, and 2) if the exchange visitor is eligible for an extension. If not sure, please consult the Office of International Education before you make any formal request.

Proposed dates of extension: From: _____ To: _____

12. Source and amount of funding (must be at least \$2,000.00 for EV, and \$500 for each additional J-2 per month)

a. Xavier University Funds, including grants paid through payroll \$

b. Non-University Funds, including only funds from external sources which will not be processed through Xavier University channels

U.S. Government Agency: \$

International Organization: \$

All other organizations providing support: \$

c. Personal Funds, if applicable \$

Approval is granted to extend the stay of the above named exchange visitor.

Faculty/Staff Sponsor: _____ Date: _____

Signature: _____ Telephone: _____ E-mail: _____

Department Chair's Signature: _____ Date: _____

Dean's Signature: _____ Date: _____