

University of South Alabama **Office of Immigration** Meisler Hall 2200• 390 Alumni Circle Mobile, AL 36688-0002 Phone: 251.460.6050

E-mail: immigration@southalabama.edu

USA J-1 Scholar Request Form *Please allow 5 business days for all requests to be processed*

Jag # _				
Full N	ame:			
	Family/ Last Name (Surname)	Given Name (First)	Middle Name (if any)
Email		Phone Number:		
<u>Reaso</u>	n for Update/Change to DS-201	<u>19</u>		
Change of Name (new passport copy with name change must accompany this request)				
	Update financial information			
Lost/Damaged Previous Document				
Travel signature lines full				
Please	Adding Dependent(s): Submit for a spouse and an additional \$ and financial documents, if appl complete the information below,	1000 per month for each child licable. Financial documents	d. Attach copies of depender	nt passport(s)
	lent Name City & Country of		Residence Relationship	Gender
		· · · ·		
-	e email address:			
Child(ren) email address:	;		
I will j passpe	erstand that my J-2 dependent(s provide evidence of insurance a ort entry stamp to the Office of ren)'s arrival.	nd copies of their DS-2019,	passport info page, visa pa	age, and
Schold	ır Signature:	<i>I</i>	Date:	_