

V. PREVIOUS J-1 HISTORY: Have you been in the U.S. previously as a J-1 Exchange Visitor (with form DS-2019)?

- Yes (Please complete section VI)
- No

VI. IF YOU ANSWERED YES TO SECTION V ABOVE, please complete the following:

1. Dates of your previous program: ____/____/____ to ____/____/____
(provide copy of DS-2019) Mo. Day Yr. Mo. Day Yr.
2. Category of your previous J-1 status:
 - 215 University undergraduate student
 - 214 University graduate student
 - 213 University teaching staff including researchers
 - 212 University administrative staff
 - Other (please specify) _____
3. What university/institution issued your DS-2019?

4. What was the source of your previous financial support?
 - a. From previous university/institution (Please indicate the department and the nature of employment):
_____ \$ _____
 - b. U.S. Government Agency(ies) \$ _____
 - c. International Organization(s) \$ _____
 - d. Your Government \$ _____
 - e. The Binational Commission of Your Country \$ _____
 - f. All other organizations providing support \$ _____
 - g. Personal funds \$ _____
5. Are you subject to the 2 year home-residence requirement? (Provide copy of J-1 entry visa)
 - Yes
 - No
 - Don't know

VII. DEPENDENTS TO ACCOMPANY APPLICANT:

Last/Family Name	First Name	Date of Birth Mo./Day/Year	Country of Birth	Relationship to you (spouse, son, daughter)

MAILING ADDRESS FOR EXPRESS MAILING:

Street #: _____
 City, State/Province: _____
 Country: _____
 Zip Code: _____
 Telephone: _____
 Cell Phone: _____
 E-mail: _____
 Fax: _____