



Pre-Arrival Packet

2016

This packet of information contains a great deal of very important information which will make your arrival into the U.S. – and the beginning of your program – much easier!

Reminders:

1. Scan the enclosed *Pre-arrival and Flight Summary sheet* to DGE promptly after scheduling your departure flight.
2. Organize your documents in one folder and pack in your carry-on bag.
3. Notify DGE within three days of your arrival. This may be done through our website: www.dynamicglobalexchange.com. Become familiar with the information on our website under the Intern/Training tab.
4. Once you have read the entire Pre-Arrival packet, you must complete the quiz found here:
<http://www.emailmeform.com/builder/form/ETbq813fSucb7x2Wtf25o702>
Do not submit the quiz until all of the answers are correct. (Your score at the bottom will read 10.0 once you have correctly answered all of the questions.)

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Pre-Arrival Summary Document

Please read, complete, and scan to DGE

Keep these two pages with you as you pack, throughout your travel, and on arrival!

It briefly notes and explains IMPORTANT information regarding your preparation to depart for the U.S. and what you MUST do upon your arrival!

- ✓ **You may NOT begin work in the U.S. before your Program Start Date** (on your DS-2019). You are considered ACTIVE in your program once you've completed the SEVIS validation form located on our website and received a confirmation email from DGE. Arriving early will shorten your work program (to adhere to the maximum duration dictated by the U.S. Department of State). Your insurance is active once you are validated in SEVIS.
- ✓ Make 2 copies of ALL documents (passport, visa, DS-2019) – leave one set at home, carry the other set separate from originals. *You MUST have ALL original documents in your carry-on to be processed properly through U.S. Customs!*
- ✓ Email DGE to confirm your flight plans (katelyn@dynamicglobalexchange.com).
- ✓ Bring \$1,000 cash or **access to cash** (credit card/traveler's checks) for Summer Work and Travel. Bring \$2,000 cash or **access to cash** (credit card/traveler's checks) for Intern and Training.
- ✓ You will need these funds on arrival to:
 - Acquire housing **if not provided** (you will typically pay \$500 - \$750 immediately, depending on number of roommates) – Apartment building owners require you to pay a security/refundable deposit
 - Pay for airport shuttle
 - Pay for hotel until permanent housing is acquired (if not provided)
 - Pay for living expenses until first pay is received (up to 3 weeks)
- ✓ On the airplane you will be given an entry document (I-94) that must be completed VERY CAREFULLY! The document asks for your "Family Name." Print this EXACTLY as it appears on your passport (this may be called "Surname" or "Family Name" in your passport)! If you are unsure what to write in this section, you may ask the Customs official for assistance. Your birthday must be entered as: day/month/year. **Your passport and this document must MATCH EXACTLY!**
- ✓ When you present yourself to the Customs official, he/she will stamp your DS-2019. (If you require a paper version of your Form I-94, it will be available at www.cbp.gov/I94).
- ✓ Upon arrival: Access our website (www.dynamicglobalexchange.com), click on "Check In For New Arrivals" button, complete and submit form online (this is the only to complete your SEVIS validation).
- ✓ If staying in a hotel, upon entering your hotel room, lock all valuables (including original documents, cash, traveler's checks, and credit cards) in the "in-room" safe (the safe is usually in the closet). Do not carry your documents or excess cash with you (unless conducting business).
- ✓ At your housing/hotel keep all doors and windows closed and locked (including balcony doors) when you are away or sleeping.
- ✓ Notify DGE IMMEDIATELY of your apartment address and room number (State Department requirement).
- ✓ Notify DGE IMMEDIATELY of your cell phone (if you will not have one, let us know).

Flight Information - **SEND TO DGE AT LEAST ONE WEEK BEFORE ARRIVAL! You MUST purchase a round trip ticket!**

Arrival information for the FINAL flight of your journey to your Host Company (this may be different from your originating flight):

Airline: _____ Flight Number: _____

Departing City: _____ Departure Time: _____ Departure Date: _____

Arrival City: _____ Arrival Time: _____ Arrival Date: _____

Transportation from airport to job site (check one):

- ☐ Participant has arranged transportation and will arrive at job site on _____. (Date)
- ☐ Transportation to employer upon arrival to the US has been arranged, participant will arrive at job site _____. (Date)

Participant must be aware of the cost of transportation from airport to job site and must have the funds, in cash, to pay for this transportation. By signing below I acknowledge I have received an arrival orientation from my agency, received a complete Pre-Arrival Orientation Packet, completed the Pre-Arrival Quiz, and have read each above item carefully and fully understand it is my responsibility to fulfill each item. I also understand that not fulfilling an item may result in unfortunate circumstances ranging from personal inconvenience to my repatriation with no refund of fees.

Participant Name: _____ Date: _____

Participant Signature: _____

You must scan/e-mail (katelyn@dynamicglobalexchange.com) or fax (678-261-1419) this signed page (when you receive your DS-2019 – before you depart for the U.S.)

Important Things to Do!

Once your plane lands in the U.S. an incredible adventure awaits!
BUT ... while you are enjoying your program and working hard ...
Remember that being a J-1 participant brings very important obligations.

What must I do once I arrive in the U.S.? (Remember, the steps below can not be completed until you have arrived to your host company!)

- Get validated in SEVIS through DGE's website! You are not "legal" until you have completed this step. This can NOT be completed by phone or e-mail!
 - Click on this link: <http://www.dynamicglobalexchange.com>
 - Click on the box that is labeled "Check-In For New Arrivals" and complete the form
 - You must complete this step within the first 3 days of your stay.
- After you are validated, spend some time navigating our site. You will find important information to benefit your program experience (insurance information, etc.).
- Write down DGE's contact information and keep it in your wallet/purse!

DGE Office Number: 248 645 0505

Emergency Number: 248 885 0004

- Take a look at our Facebook page! We are listed as Dynamic Global Exchange (easy to remember!). Once you are on our page, please "Like" us! This will allow you to receive our postings of important, fun, and culturally interesting info.
- Get in the habit of checking-in with us EVERY month! We not only want to know how you are - -- to answer your questions --- to know if we can do anything to make your program experience better ... BUT ... the Department of State REQUIRES the two of us to make contact at least once a month!

We must hear from you each month by the 10th

We have made this as easy as possible:

- 1) Click on this link <http://www.dynamicglobalexchange.com>
- 2) Click on the box that is labeled "Monthly Contact," log in, and complete the form

The Exchange Visitor Program WELCOME BROCHURE

Bureau of Educational and Cultural Affairs
Private Sector Exchange
United States Department of State

The Department of State welcomes you to the United States. We are pleased to receive you as an exchange visitor. As an Exchange Visitor Program participant, you will acquire an experience in the United States and as an ambassador of your country you will help educate the American people about your home country and culture.

This brochure will help you understand the purpose of the Exchange Visitor Program and introduce you to some of the major requirements of the Exchange Visitor Program regulations that are most relevant to you.

THE EXCHANGE VISITOR PROGRAM

THE U.S. DEPARTMENT OF STATE administers the Exchange Visitor Program under the provisions of the Mutual Educational and Cultural Exchange Act of 1961, as amended. The Act promotes mutual understanding between the people of the United States and other countries by means of educational and cultural exchange. The Exchange Visitor Program provides foreign nationals opportunities to participate in exchange programs in the United States with the expectation that on completion of their exchange program, they will return home to share their experiences.

Sponsors – The U.S. Department of State designates U.S. organizations such as government agencies, academic institutions, educational and cultural organizations, and corporations to administer exchange visitor programs. These organizations are known as sponsors. Sponsors screen and select exchange visitors to participate in their programs based on the regulations governing the exchange activity and stated in 22 CFR Part 62. Sponsors provide participants pre-arrival information, an orientation, and monitor their activities throughout their exchange program.

Sponsors offer or identify cross-cultural activities that will expose exchange visitors to American society, culture, and institutions. Exchange visitors are encouraged to participate in activities that provide them with an opportunity to share their language, culture, and history with Americans.

Responsible Officers – Sponsors appoint individuals as responsible officers and alternate responsible officers to advise and assist exchange visitors. These officers issue the Certificate of Eligibility (Form DS-2019), and conduct official communications with the Department of State and the Department of Homeland Security (DHS) on your behalf. Should you have any questions about the regulations or any aspect of your exchange program, your initial and primary contact is the sponsor. Unless provided specific contact information by your sponsor you should contact the person whose name and telephone number can be found on your Form DS-2019.

Exchange Visitor – An exchange visitor is a foreign national selected by a sponsor to participate in an exchange visitor program and who is seeking to enter or has entered the United States temporarily on a J-1 visa.

Spouse and dependents - Some categories of the Exchange Visitor Program permit a spouse and/or unmarried children, under 21 years of age, to accompany an exchange visitor to the United States. These individuals are dependents of the J-1 and may apply for J-2 visas with the permission of your sponsor.

REGULATIONS - RULES

IT IS IMPORTANT THAT YOU understand and abide by the Exchange Visitor Program regulations, U.S. laws and sponsor rules. Regular contact with your responsible officer will help you keep current of any change which may affect your J-visa status. Some requirements of the Federal regulations and where to find them are indicated below.

Register with your sponsor – Your Form DS-2019 was created in a computerized system known as the Student and Exchange Visitor Information System (SEVIS). This System is administered by the Department of Homeland Security and is used to collect and maintain information on the current status of non-immigrants and their dependents in the sponsor's program during their stay in the United States.

When you arrive in the United States, you must contact your sponsor to ensure that your data in SEVIS is accurate and updated. Failing to maintain your status could result in serious consequences and may affect your ability to remain in or return to the United States.

Activities and Program Provisions – You entered the United States in a specific program category, and are required to engage in that category and the activity listed on your Form DS-2019. You must comply with the specific program provisions of the regulations relating to your exchange category.

Insurance – You are required to have medical insurance in effect for yourself (J-1) and any dependents (J-2) for the duration of your program. Some sponsors provide the required insurance for their participants. Other sponsors may allow you to make your own arrangements or may help to identify insurance carriers. Consult with your responsible officer before the start of your program.

(a) Minimum Insurance Coverage – Insurance shall cover: (1) medical benefits of at least \$50,000 per person per accident or illness; (2) repatriation of remains in the amount of \$7,500; and (3) expenses associated with medical evaluation in the amount of \$10,000.

(b) Additional Terms – A policy secured to fulfill the insurance requirements shall not have a deductible that exceeds \$500 per accident or illness, and must meet other standards specified in the regulations.

(c) Maintenance of Insurance – Willful failure on your part to maintain the required insurance throughout your stay in the United States will result in the termination of your exchange program.

Maintenance of Valid Program Status – You are required to have a valid and unexpired Form DS-2019. Sponsors may terminate an exchange visitor's program for violating U.S. laws, Exchange Visitor Program regulations, or the sponsor's rules governing their particular program.

Required Notifications to Sponsors – You must inform your sponsor if you change your address (residence) or telephone number, or complete or withdraw from your exchange visitor program early. Doing so assists your sponsor in complying with their notification and reporting requirements to the U.S. Department of State and the Department of Homeland Security. Failure to keep your sponsor informed could result in the termination of your program status.

Current Regulations – The Exchange Visitor Program regulations are located in the Code of Federal Regulations, (22 CFR, and Part 62). The regulations are generally available for review at the offices of your sponsor, universities, law schools, or large public libraries. They are also available on the Internet at:

<http://exchanges.state.gov/education/jexchanges>

For Further Information – Additional requirements that may apply to you are set forth in the Exchange Visitor Program Regulations. Review a copy of the current regulations and consult with your responsible officer.

Contacting the Department of State – The Exchange Visitor Program is administered under the oversight of the Deputy Assistant Secretary for Private Sector Exchange, Bureau of Educational and Cultural Affairs (ECA). The Office of Designation and the Office of Exchange Coordination and Compliance are located at:

Bureau of Educational and Cultural Affairs
Department of State
State Annex SA-5, Fifth Floor
Washington, DC 20522-0505

The office of Designation is organized under two divisions. The Academic and Government Programs Division, and the Private Sector Program Division. Contact information and the exchange categories for the divisions are identified

Below:

Academic and Government Programs Division (ECA/EC/AG)
Categories of exchange: Government Visitor, International Visitor, Professor, Research Scholar, Short-Term Scholar, Specialist, Student (College and University)
Telephone: 202 632-9310 Fax: 202 632-2701

Private Sector Program Division (ECA/EC/PS)
Categories of exchange: Alien Physician, Au Pair, Camp Counselor, Intern, Secondary Student, Summer Work Travel, Teacher, Trainee
Telephone: 202-632-2805 Fax: 202-632-2701

The Office of Exchange Coordination and Compliance is responsible for monitoring designated sponsors for regulatory compliance. Inquiries regarding sponsors and the Program can be emailed to Compliance by using
JVisas@state.gov.

Dynamic Global Exchange Contact Information

My Sponsor is:

Dynamic Global Exchange
30725 River Crossing Drive
Bingham Farms, MI 48025

Office Phone Number: (248) 645-0505

Emergency Cell Number: (248) 885-0004
(The Emergency Cell is staffed at all times.)

Officers:

Deb Martin, Executive Director
deb@dynamicglobalexchange.com

Marisa Martin, Managing Director
marisa@dynamicglobalexchange.com

Department of State Contact Information

DESIGNATION DIVISION:

Mailing/Street Address:

U.S. Department of State
Office of Designation
Private Sector Programs Division
ECA/EC/D/PS - SA-44, Ste. 668
301 4th Street SW
Washington, DC 20547

Telephone: 202 632 2805
Fax Number: 202 632 2701

COMPLIANCE DIVISION:

Mailing/Street Address:

U.S. Department of State
Office of Exchange Coordination and Compliance
ECA/EC/ECC - SA-44, Ste. 667
301 4th Street SW
Washington, DC 20547

Email: jvisas@state.gov

Website:

www.exchanges.state.gov/jexchanges

Purpose and Requirements

While the *Training program* and *Intern program* may be attractive to exchange visitors for the opportunity to live and work, for an extended period, in the U.S., ultimately, the program fulfills a public diplomacy mission by offering internationals the opportunity to gain insights into the U.S. – its people, culture, language, business methods and institutions. The friendships which develop during this extended program period serve to establish long-lasting ties between people of the U.S. and other countries.

The primary objectives of the Intern and Training programs are:

- to enhance the skills and expertise of participants in their academic or occupational fields through participation in structured and guided work-based training and internship programs;
- to improve participants' knowledge of American techniques, methodologies, and technology;
- to increase participants' understanding of American culture and society and to enhance Americans' knowledge of foreign cultures and skills through an open interchange of ideas between participants and their American associates;
- For participants to return to their home countries and share their experiences with their countrymen.

Home Country Presence Requirement

The Immigration and Nationality Act was created in 1952 organizing a variety of immigration statutes into one location. Section 212(e) of this act relates to visitors participating in exchange programs. That section defines the “Two-Year Home Country Physical Presence Requirement.” This requirement is one of the most important characteristics of the J-1 exchange visitor status.

The two-year home country physical presence requirement is intended to prevent a visitor who is subject to the requirement from staying longer than necessary to achieve the program objective(s) and to ensure that the visitor’s home country receives the benefits from the objective(s) met during the exchange visitor’s program.

To understand how this requirement relates to you as an Intern/Training program participant, it is necessary to know:

- Are you subject to the requirement?
- If so,
 - how is the requirement fulfilled?
 - what does the requirement restrict?

Are you subject to the requirement?

As an exchange visitor, you are subject to the Two-Year Home Country Physical Presence Requirement if:

- Your participation is/was funded in any way by your home government or by the U.S. government
- The skill being acquired/advanced is in limited supply in your home country, as listed on the “Exchange Visitor Skills List” (<https://travel.state.gov/content/visas/en/study-exchange/exchange/exchange-visitor-skills-list.html>)
- Your program involves medical training

If you have ever been subject to the requirement, you remain subject until the requirement has been satisfied.

The Department of State and the Department of Homeland Security commonly make the initial determination regarding whether or not an exchange visitor is subject to this requirement. Final authority on this status is held by the Exchange Visitor Program and the Bureau of Consular Affairs at the Department of State.

How is the requirement fulfilled?

If you are subject to the requirement, you must:

- Accumulate two years living in your home country after completion of your exchange program before being eligible to pursue certain types of visas/resident status/status changes

OR

- Receive a waiver of the requirement from the Department of State

What does the requirement restrict?

Being subject to the requirement has three major restrictions on future U.S. immigration options. Until the requirement is fulfilled, the subjected visitor:

- Is not eligible to obtain an H or L visa
- Is not eligible for permanent resident status in the U.S.
- Is not eligible to change status from J to any other nonimmigrant status from within the U.S. (with few exceptions)

If you are subject to the requirement, you may return to the U.S. after completing your program before you have resided in your home country for two years. If you are returning to the U.S., the visa that you use to enter the U.S. depends of the purpose of your visit. The only visas that you cannot use until you have fulfilled the two-year home country physical presence requirement are H, L, and immigrant ("green card") visas.

A waiver to the requirement may be granted if at least one of the following reasons is properly documented:

- The home country states it has no objection to the waiver
- The waiver is requested by an interested U.S. government agency
- There exists exceptional hardship to the U.S. citizen/permanent resident spouse or child of the visitor
- There exists fear of persecution due to race, religion, or political views

(More detailed information regarding waivers is available on the Department of State website: <https://travel.state.gov/content/visas/en/general/ineligibilities.html>)

This information is intended only to help you understand the nature of the requirement, not to serve as a legal reference. For additional information contact an officer of Dynamic Global Exchange.

What Do I Take To My Visa Interview?

Once your visa appointment has been scheduled, it is time to organize your documents!
If you have any questions, your international office staff are well prepared to assist!

Being dressed professionally and having your documents well organized will help make a good impression on the Consulate officer. The "interview" typically lasts no more than 10 minutes and is usually conducted with you standing at the officer's window (often speaking by microphone through a glass). Not very personal – but, that's how it's done.

Here is what MUST be in your document folder:

(<http://j1visa.state.gov/participants/how-to-apply/interviews-documents/>):

- DS2019 Form - Signed in blue ink (keep this form forever!)
- Passport (it must be valid at least 1 year after your program end date)
- Completed Budget Worksheet
- DS160 Barcode page (You completed the DS160 when you applied on-line for your interview appointment
<https://ceac.state.gov/genniv/>)
- One 2x2 "passport-style" photo
- SEVIS receipt (this is your proof of payment)
- Job offer (signed by you, the employer, and DGE)
- Proof of insurance: <http://www.compassbenefits.com/dynamicglobalexchange/>

What is the purpose of this interview?

Applicants must demonstrate to the Consular officer that they have binding ties to a residence in a foreign country which they have no intention of abandoning, and that they are coming to the U.S. for a temporary period. It is impossible to specify the exact form the evidence should take since applicants' circumstances vary greatly. Basically --- the Consular officer must be convinced that you WILL depart the U.S. after your program is complete.

You will likely be asked two questions. Think about these carefully and organize your answers in English before your interview.




1. *Why do want to participate in this program?* Be ready to name your employer and explain what your job will be and where you will live. Know your program dates. SWT is a cultural exchange program – that must be the primary purpose of your participation. You may show your Budget Worksheet to prove that you will have the necessary finances to support yourself during your stay.
2. *Why will you depart the U.S. once your program is complete?* Explain that you intend to purchase a round-trip ticket if the visa is approved. Discuss your family and friends, your school, job plans, any connections you have which will demonstrate your ties to your country.

Final points:

- Speak ONLY in English during your interview! This will help convince the officer that your program will be successful.
- Go alone! NOT having your friends/family with you shows you are independent.
- Go home when your program is complete! Realize it may be tempting to stay in the U.S. after your program ends. "Over-staying" your visa has very negative consequences including
 - Your Department of State record will note your illegal status
 - You AND your family will have a difficult time of getting another U.S. visa
 - Others in your country may not be allowed to participate

Notify your home office immediately of the approval (or denial) of your visa!

Sample DS-2019 Form

U.S. Department of State					DS-2019 APPROVAL NO: 1405-6119 EXPIRES: 02-29-2023 ESTIMATED BURDEN TIME: 45 min View Page 2																																																																																																																				
<p align="center">CERTIFICATE OF ELIGIBILITY FOR EXCHANGE VISITOR(J-1) STATUS</p>																																																																																																																									
<table border="1"> <tr> <td colspan="2">1. Sponsoring Organization</td> <td colspan="2">First Name:</td> <td colspan="2">Middle Name:</td> <td colspan="2">Gender: FEMALE</td> </tr> <tr> <td colspan="2">Date of Birth (mm/dd/yyyy):</td> <td colspan="2">City of Birth:</td> <td colspan="2">Country of Birth: KOREA, SOUTH</td> <td colspan="2">Citizenship Country Code: KS</td> </tr> <tr> <td colspan="2">Legal Permanent Residence Country Code: KS</td> <td colspan="2">Legal Permanent Residence Country: KOREA, SOUTH</td> <td colspan="2">Passport Code: 213</td> <td colspan="2">Passport: UNIVERSITY TEACHING STAFF INCLUDING RESEARCHERS</td> </tr> <tr> <td colspan="4">U.S. Address: Office of International Programs 3701 Chestnut Street, Suite 1W Philadelphia, PA 19104-3199</td> <td colspan="3">Exchange Visitor Program Number: P-1-00183</td> </tr> <tr> <td colspan="4">2. Program Sponsor: University of Pennsylvania</td> <td colspan="3">Participating Program Official: PROFESSOR, RESEARCH STUDENT DOCTORATE; S</td> </tr> <tr> <td colspan="4">Purpose of this form: Continue Program Participation.</td> <td colspan="3"> <div style="text-align: center;">  </div> </td> </tr> <tr> <td colspan="2">3. Period Covered Period:</td> <td colspan="5">4. Exchange Visitor Category:</td> </tr> <tr> <td colspan="2">From (mm/dd/yyyy): 06-04-2003</td> <td colspan="5">RESEARCH SCHOLAR</td> </tr> <tr> <td colspan="2">To (mm/dd/yyyy): 09-03-2003</td> <td colspan="5">5. During the period covered by this form, the total estimated financial support (in U.S. \$) from the sponsor to the exchange visitor is:</td> </tr> <tr> <td colspan="2"></td> <td colspan="5"> Current Program Sponsor Funds: \$12,420.00 Total: \$12,420.00 </td> </tr> <tr> <td colspan="4"> 6. U.S. DEPARTMENT OF STATE HAS ORIGINALLY CERTIFIED BY RESPONSIBLE OFFICER THAT A NOTIFICATION COPY OF THIS FORM HAS BEEN PROVIDED TO THE U.S. DEPARTMENT OF STATE (INCLUDE 0-770). </td> <td colspan="3"> 7. James H. Pines Alternate Responsible Officer Title: _____ Address: _____ Telephone Number: 215-898-4661 Date (mm/dd/yyyy): 06-03-2003 </td> </tr> <tr> <td colspan="7"> 8. Statement of Responsible Officer for following program (include name of program and effective date (mm/dd/yyyy)). Transfer of this certificate to another program is prohibited. In the program specified in item 2 is necessary or highly desirable to be in conformity with the objectives of the Mutual Education and Cultural Exchange Act of 1948, as amended. </td> </tr> <tr> <td colspan="4"> Signature of Responsible Officer or Alternate Responsible Officer: _____ Date (mm/dd/yyyy): _____ </td> <td colspan="3"> Signature of Responsible Officer or Alternate Responsible Officer: _____ Date (mm/dd/yyyy): _____ </td> </tr> <tr> <td colspan="4"> PRELIMINARY ENDORSEMENT OF CONSULAR OR IMMIGRATION OFFICER REGARDING SECTION 213(a) OF THE IMMIGRATION AND NATIONALITY ACT AND PS-4-44, AS AMENDED. (Include full of page 2). The Exchange Visitor is on the program: 1. <input type="checkbox"/> Not subject to the two-year residence requirement. 2. <input type="checkbox"/> Subject to two-year residence requirement based on: A. <input type="checkbox"/> Government funding (such as): B. <input type="checkbox"/> The Exchange Visitor Skills List (such as): C. <input type="checkbox"/> PS-4-44 is amended. (ALL EXCHANGING PARTICIPATING COUNTRIES AND ALL ALIEN PARTICIPANT SPONSORED BY P-1-00183 ARE SUBJECT TO THE TWO-YEAR RESIDENCE REQUIREMENT.) </td> <td colspan="3"> TRAVEL VALIDATION BY RESPONSIBLE OFFICER (Maximum validation period is one year) *EXCEPT: Maximum validation period is up to six months for Short-term Scholars and four months for Camp Counselors and American Travelers. The Exchange Visitor is in good standing at the present time. Date (mm/dd/yyyy): _____ Signature of Responsible Officer or Alternate Responsible Officer: _____ Date (mm/dd/yyyy): _____ Signature of Responsible Officer or Alternate Responsible Officer: _____ </td> </tr> <tr> <td colspan="7"> EXCHANGE VISITOR CERTIFICATION: I have read and agree with the statement on item 7 on page 2 of this document. </td> </tr> <tr> <td colspan="4"> Signature of Applicant: _____ Date (mm/dd/yyyy): _____ </td> <td colspan="3"> Signature of Responsible Officer or Alternate Responsible Officer: _____ Date (mm/dd/yyyy): _____ </td> </tr> </table>							1. 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During the period covered by this form, the total estimated financial support (in U.S. \$) from the sponsor to the exchange visitor is:							Current Program Sponsor Funds: \$12,420.00 Total: \$12,420.00					6. U.S. DEPARTMENT OF STATE HAS ORIGINALLY CERTIFIED BY RESPONSIBLE OFFICER THAT A NOTIFICATION COPY OF THIS FORM HAS BEEN PROVIDED TO THE U.S. DEPARTMENT OF STATE (INCLUDE 0-770).				7. James H. Pines Alternate Responsible Officer Title: _____ Address: _____ Telephone Number: 215-898-4661 Date (mm/dd/yyyy): 06-03-2003			8. Statement of Responsible Officer for following program (include name of program and effective date (mm/dd/yyyy)). Transfer of this certificate to another program is prohibited. In the program specified in item 2 is necessary or highly desirable to be in conformity with the objectives of the Mutual Education and Cultural Exchange Act of 1948, as amended.							Signature of Responsible Officer or Alternate Responsible Officer: _____ Date (mm/dd/yyyy): _____				Signature of Responsible Officer or Alternate Responsible Officer: _____ Date (mm/dd/yyyy): _____			PRELIMINARY ENDORSEMENT OF CONSULAR OR IMMIGRATION OFFICER REGARDING SECTION 213(a) OF THE IMMIGRATION AND NATIONALITY ACT AND PS-4-44, AS AMENDED. (Include full of page 2). The Exchange Visitor is on the program: 1. <input type="checkbox"/> Not subject to the two-year residence requirement. 2. <input type="checkbox"/> Subject to two-year residence requirement based on: A. <input type="checkbox"/> Government funding (such as): B. <input type="checkbox"/> The Exchange Visitor Skills List (such as): C. <input type="checkbox"/> PS-4-44 is amended. (ALL EXCHANGING PARTICIPATING COUNTRIES AND ALL ALIEN PARTICIPANT SPONSORED BY P-1-00183 ARE SUBJECT TO THE TWO-YEAR RESIDENCE REQUIREMENT.)				TRAVEL VALIDATION BY RESPONSIBLE OFFICER (Maximum validation period is one year) *EXCEPT: Maximum validation period is up to six months for Short-term Scholars and four months for Camp Counselors and American Travelers. The Exchange Visitor is in good standing at the present time. Date (mm/dd/yyyy): _____ Signature of Responsible Officer or Alternate Responsible Officer: _____ Date (mm/dd/yyyy): _____ Signature of Responsible Officer or Alternate Responsible Officer: _____			EXCHANGE VISITOR CERTIFICATION: I have read and agree with the statement on item 7 on page 2 of this document.							Signature of Applicant: _____ Date (mm/dd/yyyy): _____				Signature of Responsible Officer or Alternate Responsible Officer: _____ Date (mm/dd/yyyy): _____		
1. Sponsoring Organization		First Name:		Middle Name:		Gender: FEMALE																																																																																																																			
Date of Birth (mm/dd/yyyy):		City of Birth:		Country of Birth: KOREA, SOUTH		Citizenship Country Code: KS																																																																																																																			
Legal Permanent Residence Country Code: KS		Legal Permanent Residence Country: KOREA, SOUTH		Passport Code: 213		Passport: UNIVERSITY TEACHING STAFF INCLUDING RESEARCHERS																																																																																																																			
U.S. Address: Office of International Programs 3701 Chestnut Street, Suite 1W Philadelphia, PA 19104-3199				Exchange Visitor Program Number: P-1-00183																																																																																																																					
2. Program Sponsor: University of Pennsylvania				Participating Program Official: PROFESSOR, RESEARCH STUDENT DOCTORATE; S																																																																																																																					
Purpose of this form: Continue Program Participation.				<div style="text-align: center;">  </div>																																																																																																																					
3. Period Covered Period:		4. Exchange Visitor Category:																																																																																																																							
From (mm/dd/yyyy): 06-04-2003		RESEARCH SCHOLAR																																																																																																																							
To (mm/dd/yyyy): 09-03-2003		5. During the period covered by this form, the total estimated financial support (in U.S. \$) from the sponsor to the exchange visitor is:																																																																																																																							
		Current Program Sponsor Funds: \$12,420.00 Total: \$12,420.00																																																																																																																							
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Signature of Applicant: _____ Date (mm/dd/yyyy): _____				Signature of Responsible Officer or Alternate Responsible Officer: _____ Date (mm/dd/yyyy): _____																																																																																																																					

SEVIS Fee Receipt

Student and Exchange Visitor Program: SEVIS I-901 Fee

Confirmation OMB 1653-0034

Please print this page immediately for your records. You will not be able to return to this page and print it later.

Reference the confirmation number below on all inquiries related to your I-901 status. You will receive an I-797 hard copy receipt at the address you provided. You may be required to produce this receipt on your I-797 for visa issuance, admission to any United States port of entry, for any change of non-immigrant status, or other United States immigration benefits.

When you go to the Consulate for your visa, you should bring this receipt or your I-797 to prove you have paid the SEVIS fee.

U.S. Department of Justice
Department of Homeland Security Notice of Action

THE UNITED STATES OF AMERICA	
RECEIPT NUMBER: (Confirmation Number):	CASE TYPE: I-901 Fee Remittance Form for F-1, F-3, M-1, M-3 and J-1 Non-immigrants.
NAME AND ADDRESS:	NOTICE TYPE: Receipt Type
RECEIVED DATE:	APPLICANT:
NOTICE DATE:	PAGE: 1 of 1

This fee payment is valid **ONLY** for your particular course of study or program. If you fall out of status, apply for a new F-1, F-3, M-1, M-3, or J-1 non-immigrant visa, or if you want to change your non-immigrant category to an F-1, F-3, M-1, M-3 or J-1, you may be required to pay another fee.

APPLICANT STATUS: F-1, F-3, M-1, or M-3
 DATE OF BIRTH: _____
 GENDER: _____
 SCHOOL CODE: _____
 AMOUNT RECEIVED: \$100.00
 SEVIS IDENTIFICATION NUMBER: _____

Your I-901 fee transmittal form has been received. Please notify us immediately if any of the above information is incorrect.

THIS ELECTRONIC RECEIPT MAY BE USED AS EVIDENCE OF PAYMENT. IN ADDITION, YOUR OFFICIAL I-797 RECEIPT NOTICE WILL BE DELIVERED TO THE ABOVE ADDRESS BY THE RECEIPT DELIVERY METHOD YOU SELECTED.

The non-refundable SEVIS fee receipt for your program is collected by the U.S. Department of Homeland Security to cover the costs of the Student and Exchange Visitor System (SEVIS). The SEVIS fee for your program is \$180.

The SEVIS fee is included in the fees you paid to your international cooperator (or to DGE directly). This is a separate fee from the Visa application fee.

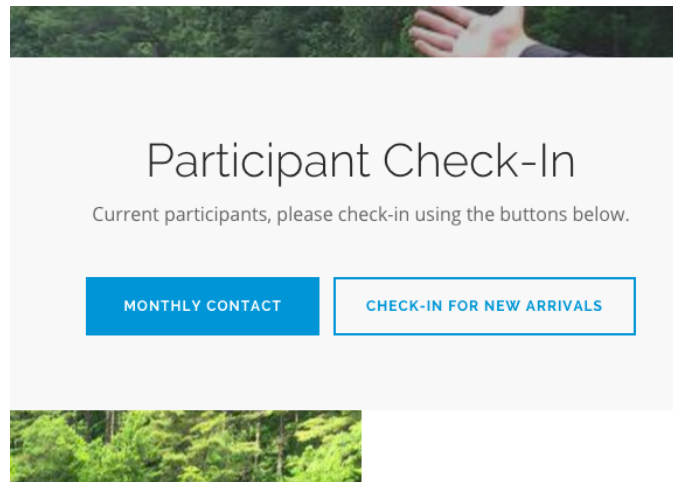
You will receive your SEVIS fee receipt either from your international cooperator OR from DGE directly.

You must bring this receipt to your visa interview.

Checking In

J-1 students, have you checked in this month?

Remember, the U.S. Department of State requires that you must check in with Dynamic Global Exchange when you arrive to the United States and again each month to maintain your visa status! Check-ins must be done by the 10th of each month.



1. Go to our site at www.dynamicglobalexchange.com and click on the Check-In For New Arrivals button in the middle of the page. (You can also click on the Participant Check In button in the top right corner of the page to go directly to the Check-In For New Arrivals button.)
2. Once there, you will need to enter your email address in the field labeled Email Address and the password for everyone is dge2016. It is very important that there are no spaces before or after your email address or password. **Please note: You will not be active in the system until the day that you arrive in the country. If you try to check in sooner, the system will not allow you to log in.**
3. You will then arrive at the form that you must complete in order to successfully check in. You will not be able to submit the form until all of the required fields have been completed. Please note both your host company and international cooperator will be listed by their legal name which may be different than the name that you call them.
4. Once you have successfully submitted the form, you will see a thank you message indicating that your check in is complete.

You will follow the same steps to log in and check in monthly, but should click on the Monthly Contact button since you will no longer be a new arrival.

Accident and Illness Insurance

You are fully insured as directed by the Federal Regulations governing your program.
The insurance brochure provides a full explanation of your coverage. All forms are on our website.

Your insurance covers accidents and/illness (not pre-existing - previous 36 months - medical conditions).

Your insurance will not start until you have completed your SEVIS check-in, so make sure to check-in as soon as you arrive.

Your insurance, Overseas Travel Medical Plan, is administered by:

Seven Corners

303 Congressional Blvd.
Carmel, IN 46032
Phone: 800-690-6295
www.sevencorners.com/att

For a list of doctors and clinics who fully accept your insurance ("providers"):

1. **Call 800 335 0477 (Monday – Friday, 8am – 5pm) ... OR ...**
2. **www.viiad.com/7corners/public/app/compass/provider_search_main.asp**
3. **Enter your zip code (or City/State)**
4. **Select "Provider Type" --- typically you will choose "Physician"**
5. **Select "Specialty" --- typically you will choose "Family Practice/Internal"**
(*"Family Practice/Internal"* are the terms used to describe a general doctor. This is a good choice if you have something simple ... like a sore throat, a slight rash, an upset stomach, etc.)

You must pay \$75 ("co-payment") per illness/accident to a doctor or walk-in clinic. If you must return for a follow-up visit, you do NOT pay another co-payment.

You must pay \$250 per visit to an Emergency Room if the doctor does NOT "admit" you to the hospital. "ADMIT" means you are ill/injured enough that an overnight (or more) hospital stay is required.

You are NOT required to seek care with a "preferred provider." In fact, some areas where participants are placed have no near-by preferred providers. In this case, you will likely be required to pay at the time of services ... so you will submit the claim/receipts and the insurance company will send you a check for reimbursement. If you seek care from a doctor who does not accept your insurance, you will be required to pay all charges above those deemed "reasonable and customary" by the insurance company.

You have very limited dental coverage (maximum of \$500). This includes accidents to healthy teeth (not including tooth damage to eating or biting into a foreign object – example: fork) and alleviation of pain. You have limited coverage for **mental health** (see brochure for details).

You ARE required to submit a "CLAIM FORM" to the insurance company for each illness/accident. This allows the insurance company to pay claims (the bills) sent by the doctor. You may submit a Claim Form by mail/fax/email. This information is on the Claim Form. You may print a claim form:

www.compassbenefits.com/dynamicglobalexchange/claims.html

You are 100% covered for prescription medicines. However, you may have to pay, submit bills, and wait for reimbursement.

Thirty Day Grace Period

If you are staying in the U.S. during the Department of State granted 30 day grace period, which begins after your program end date (as stated on your DS 2019), you MUST purchase additional insurance. If you are staying 1 day to 14 days past your program end date, the cost is \$25. If you are staying 15 days to 30 days past your program end date, the cost is \$50. Payment must be sent to DGE to extend your insurance.

Mail check or money order, payable to "Dynamic Global Exchange":

Dynamic Global Exchange
30725 River Crossing
Bingham Farms, MI 48025

Keep copies of ALL claim forms and bills sent to the insurance company!!!
CARRY YOUR INSURANCE CARD AT ALL TIMES!

INJURY AND ILLNESS CLAIM FORM

Seven Corners, Inc.
303 Congressional Blvd.
Carmel, IN 46032
800-335-0477 or 317-575-2656 Fax: 317-575-2256



To be considered, claim form and receipts for expenses must be submitted within 90 days of the date of service!!!

Instructions:

1. This form must be completed by the Insured in full to be considered for Medical Expense Payment.
2. Fully itemized bills including Claimant's Name, Nature of Illness/Injury, must be included with this claim form.
3. Description and Charge for each service provided.
4. This form must be signed and dated in all applicable sections. In most cases, two signatures are required.
5. This form and all attached bills must be submitted to the address indicated above.
6. If you would prefer reimbursement in Africa, complete Page 3. **Required for any reimbursement in Africa.**

The furnishing of this form, or its receipt by the Company, must not be construed as an admission of any liability on the Company, nor a waiver of any of the conditions of the Insurance contract. Any person who knowingly and/or with intent to injure, defraud, or deceive an Insurance company or other person files a statement of claim containing false, incomplete or misleading information, may be guilty of insurance fraud and subject to criminal and substantial civil penalties.

Coverage information

Insurance Carrier:	Name of Group / Plan:	Policy / Certificate Number:
Coverage Effective Date (month/day/year) ____/____/____	Coverage Termination Date (month/day/year) ____/____/____	

Insured information

Name of Insured (last, first, middle initial, suffix):	Name of Claimant (last, first, middle initial, suffix):
Date of Birth: ____/____/____ (month/day/year) Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Date of Birth: ____/____/____ (month/day/year) Sex: <input type="checkbox"/> M <input type="checkbox"/> F

Claimant information

Current address

Current Residence Address (address, city, state, postal code, country):		Permanent Address in Home Country (address, city, state, postal code, country):
Daytime Phone Number: () _____	Email Address: _____	If Applicable, Date scheduled to return to Home Country: ____/____/____ (month/day/year) or <input type="checkbox"/> N/A
If Applicable, Date of Arrival in U.S.: ____/____/____ (month/day/year) or <input type="checkbox"/> N/A		

Permanent address

Medical information

If injury, provide details, i.e., how, when and where injury occurred:	
If illness, advise when and where symptoms first occurred and nature of illness:	
Name and address of Consulting or Treating Physicians:	
Have you ever been treated for this illness before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, when?
Provide Name and Address of your Primary Care Physician in your Home Country:	
Please advise names of any prescription medications you are presently taking:	
Indicate other Employer / Private / Government Medical Insurance coverage, include name, address, policy number and certificate number of insurer:	

I, the undersigned authorize any hospital or other medical-care institution, physician or other medical professional, pharmacy, insurance support organization, governmental agency, group policyholder, insurance company, association, employer, relative or benefit plan administrator to furnish to Seven Corners, Inc. any and all information with respect to any injury or illness suffered by, the medical history of, or any consultation, prescription or treatment provided to, the person whose death, injury, illness or loss is the basis of the claim and copies of all that person's hospital or medical records, including information relating to mental illness and use of drugs and alcohol, to determine eligibility for benefit payments under the policy identified above. I authorize the group policyholder, employer or benefit plan administrators to provide Seven Corners, Inc. with financial and employment related information and documents. I agree that I will provide Seven Corners, Inc. with any medical records, or other records, requested by Seven Corners, Inc. to process the claim. I understand that my failure to provide requested documents to Seven Corners, Inc. may result in denial of the claim. I understand that failure by any of the above referenced entities or individuals to provide information or documents to Seven Corners, Inc. may result in denial of the claim. In addition, I hereby certify that the above information is true and correct to the best of my knowledge and belief. I understand that any false statements made on this form or omissions of information requested by this form may result in denial of the claim. I acknowledge and understand the Fraud Notices on Page 2 of this document.

Signature of Claimant or Parent, If Claimant is a Minor _____ Date _____

Budget Worksheet

Based on the information received from DGE, input information below to estimate your monthly budget.
Use multiple sheets, based on the length of your program.

	Month 1	Month 2	Month 3	Month 4	Month 5
FUNDS AVAILABLE					
Wages					
Tips					
Gifts from home					
Savings					
Total Funds Available					
EXPENSES					
Housing					
Rent					
Utilities					
Telephone					
Internet					
Daily Living					
Groceries					
Eating Out					
Transportation					
Public					
Other					
Entertainment					
Movies					
Concerts/clubs					
Total					
Health					
Prescriptions					
Co-Pays					
Other medications					
Travel					
Plane/bus fare					
Accommodations					
Food					
Rental Car					
Personal					
Clothing					
Gifts					
Haircuts					
Books/Music					
Taxes (Assume 14%)					
Total Expenses					
Total Funds Available MINUS Total Expenses					

I understand that this personal budget is an estimate of my available funds and my expected expenses. I understand that taxes will be deducted from my paycheck (about 15% ... the majority of which I will receive as a tax refund the following spring once I file my tax return).

I understand that it is my responsibility to complete this budget to show to the Consular Officer at my visa interview AND to use as a planning tool for my time in the U.S.

I-94 Documentation: Entry into the U.S.

Overview

In order to increase efficiency, reduce operating costs and streamline the admissions process, U.S. Customs and Border Protection has automated Form I-94 at air and sea ports of entry. The paper form will no longer be provided to a traveler upon arrival, except in limited circumstances. The traveler will be provided with a CBP admission stamp on their travel document. If a traveler needs a copy of their I-94 (record of admission) for verification of alien registration, immigration status or employment authorization, it can be obtained from www.cbp.gov/I94.

Frequently Asked Questions

What is a Form I-94?

Form I-94 is the DHS Arrival/Departure Record issued to aliens who are admitted to the U.S., who are adjusting status while in the U.S. or extending their stay, among other things. A CBP officer generally attaches the I-94 to the non-immigrant visitor's passport upon U.S. entry. The visitor must exit the U.S. on or before the departure date stamped on the I-94.

How will the new I-94 automation impact inter- national travelers' entry to the U.S.?

I-94 automation will not impact a traveler's ability to enter the U.S. CBP will continue to create an I- 94 record for all travelers who require one, but the paper form will be created in an electronic format and not provided to the traveler. If a traveler re- quires a paper version of Form I-94, it will be available at www.cbp.gov/I94

Will CBP provide a traveler with any documentation or evidence showing status and time al- lowed in the U.S.?

Yes. CBP will provide each traveler with an ad- mission stamp that is annotated with date of admission, class of admission and admitted until date. The electronic arrival/departure record can be obtained at www.cbp.gov/I94.

Will travelers need to do anything differently when exiting the U.S.? How can they be sure their departure will be recorded properly with this new the I-94 automation process?

Travelers will not need to do anything differently upon exiting the U.S. Travelers issued a paper Form I-94 should surrender it to the commercial carrier or CBP upon departure. The departure will be recorded electronically with manifest information provided by the carrier or by CBP. If travelers did not receive a paper Form I-94 and the record was created electronically, CBP will record their departure using manifest information obtained from the carrier.

How does a traveler revalidate a visa without their I-94?

The I-94 admission record is created electronically and maintained in CBP systems. CBP will verify the I-94 electronically to re-validate an expired visa if the traveler meets the conditions of automatic revalidation. If entry occurred prior to automation, a paper form must be presented in order to comply with validation requirements. For more information about automatic revalidation go to http://www.cbp.gov/linkhandler/cgov/travel/id_visa/revalidation.ctt/revalidation.pdf.

Will CBP still issue a paper Form I-94 once the automation begins?

No. Rather than distributing a paper Form I-94, CBP will scan a traveler's passport, generating an electronic arrival record with data elements found on the current paper Form I-94. CBP will make the electronic I-94 available at www.cbp.gov/I94. Travelers may visit this website to print their electronic I-94 number before

applying for immigration or public benefits, such as a driver's license or a Social Security number.

Since automation only affects air and sea arrivals, a paper Form I-94 is still issued at the land border ports of entry. Also, CBP intends to continue to provide a paper Form I-94 to certain classes of aliens, such as refugees, certain asylees and parolees, and whenever CBP determines the issuance of a paper form is appropriate.

What if a traveler does not have a foreign pass- port for CBP to stamp?

Individuals without a foreign passport will be sent to CBP's secondary inspection upon arrival into the U.S., where they will receive their electronic I- 94 number. These individuals will be issued a paper I-94 with the pre-printed number crossed out, and the actual electronic I-94 number handwritten upon it.

Employers and agencies can expect refugees, asylees, parolees and others who do not have any other travel document to have these I-94s.

What should a traveler do if he or she was ad- mitted incorrectly to the U.S.?

If an applicant was admitted incorrectly to the U.S., the applicant should visit a local CBP Deferred Inspection Site or port of entry to have his or her admission corrected. A list of Deferred Inspection Sites and ports of entry can be found at www.cbp.gov, under the "Ports" link at the bottom of the page.

If an applicant received an incorrect I-94 from U.S.

Citizenship and Immigration Services, the applicant should refer to Form I-102 available at www.uscis.gov/forms.

Will the process help expedite passenger processing time?

The I-94 automation will expedite passenger processing. CBP automated the I-94W process in 2010, which independent studies show has resulted in an approximate 20- second time savings per passenger. CBP estimates that I- 94 automation will result in similar time savings.

What is the I-94 website (www.cbp.gov/I94)? Travelers may visit the website to retrieve electronic I-94 number. Upon entering the U.S., travelers will receive a paper with instructions on how to access the website.

U.S. Customs and Border Protection
Securing America's Borders

Get I-94 Number [I-94 FAQ](#)

Admission (I-94) Number Retrieval

Admission (I-94) Record Number: 69000888062

Admit Until Date (MM/DD/YYYY): 10/10/2012

Details provided on Admission(I-94) form:

Family Name:	LI
First (Given) Name:	LYDIA
Birth Date (MM/DD/YYYY):	01/01/1990
Passport Number:	P123123213
Passport Country of Issuance:	Mexico
Date of Entry (MM/DD/YYYY):	04/11/2012
Class of Admission:	B1

Traveling to the United States

Flight Information

It is important to provide your flight information to your International Cooperator (or to DGE if you do not have a cooperator) as soon as it is scheduled (after your visa is approved).

Packing

All airlines have baggage restrictions regarding number size, and weight for air travel. Check each airline's website for current information. Pack light. Many participants shop while they are in America and you will have the same limitations on luggage when you return home.

Arriving at a U.S. Port of Entry - What to expect

U.S. Immigration and Customs Enforcement's **Student and Exchange Visitor Program (SEVP)** is committed to facilitating your stay in the United States while you enjoy your program. To enhance security without slowing legitimate travel, the Department of Homeland Security (DHS) has instituted specific U.S. entry and exit procedures. Careful planning and preparation can ensure that any delay based on these procedures is minimal.

Have ALL your program-related documents in your carry-on bag!

Without these forms you will be unable to enter the United States.

1. Your passport, valid for at least twelve months beyond your program end date
2. Your fully-executed (signed by DGE officer) DS-2019. When you received your U.S. nonimmigrant visa at the Embassy or Consulate in your country, the consular officer sealed your immigration documents in an envelope and attached it to your passport. You should not open this envelope! The Customs and Border Protection Officer at the U.S. port-of-entry will open the envelope.

In addition, it is strongly recommended that you also hand carry the following documentation:

1. Fully-executed (signed by employer, DGE, and you) Training Plan (be sure to have the full name of the host company, its address and phone number, and your supervisor's name);
2. Paper receipt for the SEVIS fee, Form I-797;
3. Name and contact information for Dynamic Global Exchange (248) 645-0505, including the 24-hour emergency contact number (248) 885-0004.
4. The full address of where you will be living OR the host company (name, address, phone) where you will be staying the first days.

For greater detail on procedures for traveling and arriving in the United States, visit:

<http://j1visa.state.gov/basics/common-questions/>

COMPLETE YOUR ENTRY PAPERWORK

On the airplane you will be given a Customs Declaration Form (CF-6059) to complete.

When stating your U.S. address state the address of your housing
OR the hotel where you will be staying the first days.

If this has not been assigned – state the full address of your hosting company

Do **NOT** write-in the address of DGE!):

U.S. Customs and Border Protection

Customs Declaration
19 CFR, 122.27, 148.12, 148.13, 148.15, 148.111, 148B.31, CFR 1616
FORM APPROVED
OMB NO. 1651-0000

Each arriving traveler or responsible family member must provide the following information (only ONE written declaration per family is required):

- Family Name: Lifshman
First (Given): John Middle: Philip
- Birth date: Day 2 / Month 5 / Year 87
- Number of Family members traveling with you: None
- (a) U.S. Street Address (hotel name/destination): Abundant Windows #88
(b) City: Shane Harbor (c) State: VI
- Nationality: French Guianese
- Passport #: CA2220847
- Country of Residence: Canada Countries visited on this trip prior to U.S. arrival: last France, although I've
Only name I visit before and Germany after they celebrated me
- Airline/Vessel Name: US Airways because of their excellent service, free inflight entertainment and baggage fee included
the latest way to save my money If airline, Flight No.: ZS40
- Point of Embarkation: Puerto Rico - San Juan
- Date of arrival in U.S.: Day 2 / Month 5 / Year 12
- The primary purpose of this trip is business: ☒ Yes ☐ No
- Are you bringing any of the following into the U.S.?
(a) Commercial Goods or Samples: no
(b) Any items you have been requested by someone else to bring into the United States:
"Significant" right and has the right name?
(c) Goods exceeding duty-free allowance: Nothing except my computer and other compliance with regulations and entry into the U.S.
He may be required to that except with a duty and a "Travel" and He has just bought! (d) Restricted/Illegal Articles: He may be required to that except with a duty and a "Travel" and He has just bought! (But seriously, there's no need to check any products, my computer, my phone, or my large suitcase. Please don't.)
- Are you bringing an amount into the U.S. of \$10,000 or greater?
No, I may be bringing in \$1000 worth, maybe around \$1000, maybe that much?
- Is there anything else you are bringing into the U.S. that you think we should know about?
There might be a laptop and in my checked luggage. He should probably know that it's not really important.

Read the instructions on the back of this form. Space is provided to list all the items you must declare.
I HAVE READ THE IMPORTANT INFORMATION ON THE REVERSE SIDE OF THIS FORM AND HAVE MADE A TRUTHFUL DECLARATION.

X John Philip Lifshman March 26, 2012
(Signature) Date (day/month/year)
For Official Use Only CBP Form 6059B (09/12)
Written by L. Saffack and D. Zhu. Designed by S. Shen

If you do not understand the form, ask the flight attendant for assistance. Having wrong information on this documents will cause problems at Passport Control!

Passing Through Passport Control

Have the following documents available for presentation:

- your passport;
- your DS-2019;
- Customs Declaration Form (CF-6059).

You will be asked to state your reason for wishing to enter the country. You will also be asked to provide information about your final destination. It is important that you tell the Officer that you will be a participant in the J-1 visa Summer Work and Travel Program. *Be prepared to provide the name and address of Dynamic Global Exchange and your employer.*

Once your inspection is successfully completed, the inspecting officer will place the Admissions Stamp in your passport.

Transportation - Detailed transportation information will be provided once you submit your flight information. You may contact your international office or DGE with questions.

Personal Expenses

DGE requires you to bring \$2000 to cover your start-up expenses and any emergency you may encounter. It is best to bring \$1000 in cash and \$1000 available via credit card or bank machine withdrawal.

Social Security Application Process

It is necessary to obtain a Social Security number (SSN). This number is required to be employed in the U.S. and to open a bank account.

- 1) You must wait 10 business days before applying
- 2) Bring
 - a. Passport (includes visa)
 - b. Sponsor letter (included in packet)
 - c. DS-2019
 - d. Complete U.S. mailing address (use the hotel's address if you haven't confirmed housing) written clearly (give paper to officer)
 - e. Local phone number (use hotel's if you/friend don't have a cell) written clearly (give paper to officer)
 - f. Mother's full name written clearly (give paper to officer)
 - g. Father's full name written clearly (give paper to officer)
 - h. Completed Social Security application
- 3) After compiling the information, the officer will print the completed application and ask you to review it for correctness. Read carefully for spelling.
- 4) The officer will provide a letter ("receipt") stating you have successfully applied for a Social Security number. You may ask the officer to stamp/date/sign this letter.
- 5) Provide your employer with the letter as proof of your application.
- 6) It will take up to 2 weeks to receive your Social Security card (by mail).

Make a copy of your Social Security Card! The original card must be stored in a safe place (**not** routinely carried with you).

To find the Social Security Office closest to you: <https://secure.ssa.gov/apps6z/FOLO/fo001.jsp>

To find the application for a Social Security card: <http://www.ssa.gov/online/ss-5.pdf>

_____, 2016

Dear Social Security Officer:

_____ is a participant of the U.S. Department of State's J-1 Cultural Exchange Summer Work and Travel program and is sponsored by Dynamic Global Exchange, Inc., a sponsoring agency designated by the U.S. Department of State.

The Summer Work and Travel program provides international university students the opportunity to be immersed in the U.S. culture while living and working in the U.S. during their school's summer vacation. By allowing an exchange of cultures, the program helps to fulfill the diplomatic mission of the Department of State.

The program dates are _____, 2016 to _____, 2016.

The birth date is _____.

If any questions remain, please feel free to contact me.

Sincerely,

Deb Martin
Executive Director
Dynamic Global Exchange, Inc.
30725 River Crossing Drive
Bingham Farms, MI 48025
www.dynamicglobalexchange.com
deb@dynamicglobalexchange.com

SOCIAL SECURITY ADMINISTRATION
Application for a Social Security Card

Applying for a Social Security Card is free!

USE THIS APPLICATION TO:

- Apply for an original Social Security card
- Apply for a replacement Social Security card
- Change or correct information on your Social Security number record

IMPORTANT: You MUST provide a properly completed application and the required evidence before we can process your application. We can only accept original documents or documents certified by the custodian of the original record. Notarized copies or photocopies which have not been certified by the custodian of the record are not acceptable. We will return any documents submitted with your application. For assistance call us at 1-800-772-1213 or visit our website at www.socialsecurity.gov.

Original Social Security Card

To apply for an original card, you must provide at least two documents to prove age, identity, and U.S. citizenship or current lawful, work-authorized immigration status. If you are not a U.S. citizen and do not have DHS work authorization, you must prove that you have a valid non-work reason for requesting a card. See page 2 for an explanation of acceptable documents.

NOTE: If you are age 12 or older and have never received a Social Security number, you must apply in person.

Replacement Social Security Card

To apply for a replacement card, you must provide one document to prove your identity. If you were born outside the U.S., you must also provide documents to prove your U.S. citizenship or current, lawful, work-authorized status. See page 2 for an explanation of acceptable documents.

Changing Information on Your Social Security Record

To change the information on your Social Security number record (i.e., a name or citizenship change, or corrected date of birth) you must provide documents to prove your identity, support the requested change, and establish the reason for the change. For example, you may provide a birth certificate to show your correct date of birth. A document supporting a name change must be recent and identify you by both your old and new names. If the name change event occurred over two years ago or if the name change document does not have enough information to prove your identity, you must also provide documents to prove your identity in your prior name and/or in some cases your new legal name. If you were born outside the U.S. you must provide a document to prove your U.S. citizenship or current lawful, work-authorized status. See page 2 for an explanation of acceptable documents.

LIMITS ON REPLACEMENT SOCIAL SECURITY CARDS

Public Law 108-458 limits the number of replacement Social Security cards you may receive to 3 per calendar year and 10 in a lifetime. Cards issued to reflect changes to your legal name or changes to a work authorization legend do not count toward these limits. We may also grant exceptions to these limits if you provide evidence from an official source to establish that a Social Security card is required.

IF YOU HAVE ANY QUESTIONS

If you have any questions about this form or about the evidence documents you must provide, please visit our website at www.socialsecurity.gov for additional information as well as locations of our offices and Social Security Card Centers. You may also call Social Security at 1-800-772-1213. You can also find your nearest office or Card Center in your local phone book.

EVIDENCE DOCUMENTS

The following lists are examples of the types of documents you must provide with your application and are not all inclusive. Call us at 1-800-772-1213 if you cannot provide these documents.

IMPORTANT: If you are completing this application on behalf of someone else, you must provide evidence that shows your authority to sign the application as well as documents to prove your identity and the identity of the person for whom you are filing the application. We can only accept original documents or documents certified by the custodian of the original record. Notarized copies or photocopies which have not been certified by the custodian of the record are not acceptable.

Evidence of Age

In general, you must provide your birth certificate. In some situations, we may accept another document that shows your age. Some of the other documents we may accept are:

- U.S. Hospital record of your birth (created at the time of birth)
- Religious record established before age five showing your age or date of birth
- Passport
- Final Adoption Decree (the adoption decree must show that the birth information was taken from the original birth certificate)

Evidence of Identity

You must provide current, unexpired evidence of identity in your legal name. Your legal name will be shown on the Social Security card. Generally, we prefer to see documents issued in the U.S. Documents you submit to establish identity must show your legal name AND provide biographical information (your date of birth, age, or parents' names) and/or physical information (photograph, or physical description - height, eye and hair color, etc.). If you send a photo identity document but do not appear in person, the document must show your biographical information (e.g., your date of birth, age, or parents' names). Generally, documents without an expiration date should have been issued within the past two years for adults and within the past four years for children.

As proof of your identity, you must provide a:

- U.S. driver's license; or
- U.S. State-issued non-driver identity card; or
- U.S. passport

If you do not have one of the documents above or cannot get a replacement within 10 work days, we may accept other documents that show your legal name and biographical information, such as a U.S. military identity card, Certificate of Naturalization, employee identity card, certified copy of medical record (clinic, doctor or hospital), health insurance card, Medicaid card, or school identity card/record. For young children, we may accept medical records (clinic, doctor, or hospital) maintained by the medical provider. We may also accept a final adoption decree, or a school identity card or other school record maintained by the school.

If you are not a U.S. citizen, we must see your current U.S. immigration document(s) and your foreign passport with biographical information or photograph.

WE CANNOT ACCEPT A BIRTH CERTIFICATE, HOSPITAL SOUVENIR BIRTH CERTIFICATE, SOCIAL SECURITY CARD STUB OR A SOCIAL SECURITY RECORD as evidence of identity.

Evidence of U.S. Citizenship

In general, you must provide your U.S. birth certificate or U.S. Passport. Other documents you may provide are a Consular Report of Birth, Certificate of Citizenship, or Certificate of Naturalization.

Evidence of Immigration Status

You must provide a current unexpired document issued to you by the Department of Homeland Security (DHS) showing your immigration status, such as Form I-551, I-94, I-688B, or I-766. If you are an international student or exchange visitor, you may need to provide additional documents, such as Form I-20, DS-2019, or a letter authorizing employment from your school and employer (F-1) or sponsor (J-1). We CANNOT accept a receipt showing you applied for the document. If you are not authorized to work in the U.S., we can issue you a Social Security card only if you need the number for a valid non-work reason. Your card will be marked to show you cannot work and if you do work, we will notify DHS. See page 3, item 5 for more information.

HOW TO COMPLETE THIS APPLICATION

Complete and sign this application LEGIBLY using ONLY black or blue ink on the attached or downloaded form using only 8 1/2" x 11" (or A4 8.25" x 11.7") paper.

GENERAL: Items on the form are self-explanatory or are discussed below. The numbers match the numbered items on the form. If you are completing this form for someone else, please complete the items as they apply to that person.

4. Show the month, day, and full (4 digit) year of birth; for example, "1998" for year of birth.

5. If you check "Legal Alien Not Allowed to Work" or "Other," you must provide a document from a U.S. Federal, State, or local government agency that explains why you need a Social Security number and that you meet all the requirements for the government benefit. NOTE: Most agencies do not require that you have a Social Security number. Contact us to see if your reason qualifies for a Social Security number.

6., 7. Providing race and ethnicity information is voluntary and is requested for informational and statistical purposes only. Your choice whether to answer or not does not affect decisions we make on your application. If you do provide this information, we will treat it very carefully.

9.B., 10.B. If you are applying for an original Social Security Card for a child under age 18, you **MUST** show the mother's and father's Social Security numbers unless the mother and/or father was never assigned a Social Security number. If the number is not known and you cannot obtain it, check the "unknown" box.

13. If the date of birth you show in item 4 is different from the date of birth currently shown on your Social Security record, show the date of birth currently shown on your record in item 13 and provide evidence to support the date of birth shown in item 4.

16. Show an address where you can receive your card 7 to 14 days from now.

17. **WHO CAN SIGN THE APPLICATION?** If you are age 18 or older and are physically and mentally capable of reading and completing the application, you must sign in item 17. If you are under age 18, you may either sign yourself, or a parent or legal guardian may sign for you. If you are over age 18 and cannot sign on your own behalf, a legal guardian, parent, or close relative may generally sign for you. If you cannot sign your name, you should sign with an "X" mark and have two people sign as witnesses in the space beside the mark. Please do not alter your signature by including additional information on the signature line as this may invalidate your application. Call us if you have questions about who may sign your application.

HOW TO SUBMIT THIS APPLICATION

In most cases, you can take or mail this signed application with your documents to any Social Security office. Any documents you mail to us will be returned to you. Go to <https://secure.ssa.gov/apps6z/FOLO/fo001.jsp> to find the Social Security office or Social Security Card Center that serves your area.

PROTECT YOUR SOCIAL SECURITY NUMBER AND CARD

Protect your SSN card and number from loss and identity theft. DO NOT carry your SSN card with you. Keep it in a secure location and only take it with you when you must show the card; e.g., to obtain a new job, open a new bank account, or to obtain benefits from certain U.S. agencies. Use caution in giving out your Social Security number to others, particularly during phone, mail, email and Internet requests you did not initiate.

PRIVACY ACT STATEMENT Collection and Use of Personal Information

Sections 205(c) and 702 of the Social Security Act, as amended, authorize us to collect this information. The information you provide will be used to assign you a Social Security number and issue a Social Security card.

The information you furnish on this form is voluntary. However, failure to provide the requested information may prevent us from issuing you a Social Security number and card.

We rarely use the information you supply for any purpose other than for issuing a Social Security number and card. However, we may use it for the administration and integrity of Social Security programs. We may also disclose information to another person or to another agency in accordance with approved routine uses, which include but are not limited to the following:

1. To enable a third party or an agency to assist Social Security in establishing rights to Social Security benefits and/or coverage;
2. To comply with Federal laws requiring the release of information from Social Security records (e.g., to the Government Accountability Office and Department of Veterans' Affairs);
3. To make determinations for eligibility in similar health and income maintenance programs at the Federal, State, and local level; and
4. To facilitate statistical research, audit or investigative activities necessary to assure the integrity of Social Security programs.

We may also use the information you provide in computer matching programs. Matching programs compare our records with records kept by other Federal, State, or local government agencies. Information from these matching programs can be used to establish or verify a person's eligibility for Federally-funded or administered benefit programs and for repayment of payments or delinquent debts under these programs.

Complete lists of routine uses for this information are available in System of Records Notice 60-0058 (Master Files of Social Security Number (SSN) Holders and SSN Applications). The Notice, additional information regarding this form, and information regarding our systems and programs, are available on-line at www.socialsecurity.gov or at any local Social Security office.

This information collection meets the requirements of 44 U.S.C. §3507, as amended by Section 2 of the Paperwork Reduction Act of 1995. You do not need to answer these questions unless we display a valid Office of Management and Budget control number. We estimate that it will take about 8.5 to 9.5 minutes to read the instructions, gather the facts, and answer the questions. You may send comments on our time estimate to: SSA, 6401 Security Blvd., Baltimore, MD 21235-6401. **Send only comments relating to our time estimate to this address, not the completed form.**

SOCIAL SECURITY ADMINISTRATION Application for a Social Security Card

Form Approved
OMB No. 0960-0066

1	NAME <small>TO BE SHOWN ON CARD</small> →	First	Full Middle Name	Last
	FULL NAME AT BIRTH <small>IF OTHER THAN ABOVE</small>	First	Full Middle Name	Last
	OTHER NAMES USED ON YOUR SOCIAL SECURITY CARD			
2	Social Security number previously assigned to the person listed in item 1 →		- -	
3	PLACE OF BIRTH <small>(Do Not Abbreviate)</small> City State or Foreign Country		<small>Office Use Only</small> 4	DATE OF BIRTH MM/DD/YYYY
5	CITIZENSHIP <small>(Check One)</small>	<input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Legal Alien Allowed To Work <input type="checkbox"/> Legal Alien Not Allowed To Work (See Instructions On Page 3) <input type="checkbox"/> Other (See Instructions On Page 3)		
6	ETHNICITY <small>Are You Hispanic or Latino? (Your Response Is Voluntary)</small> <input type="checkbox"/> Yes <input type="checkbox"/> No	7	RACE <small>Select One or More (Your Response Is Voluntary)</small> <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> American Indian <input type="checkbox"/> Other Pacific Islander <input type="checkbox"/> Alaska Native <input type="checkbox"/> Black/African American <input type="checkbox"/> White <input type="checkbox"/> Asian	
8	SEX →	<input type="checkbox"/> Male <input type="checkbox"/> Female		
9	A. MOTHER'S NAME AT HER BIRTH →	First	Full Middle Name	Last Name At Her Birth
	B. MOTHER'S SOCIAL SECURITY NUMBER <small>(See Instructions for 9 B on Page 3)</small> →	- -		<input type="checkbox"/> Unknown
10	A. FATHER'S NAME →	First	Full Middle Name	Last
	B. FATHER'S SOCIAL SECURITY NUMBER <small>(See Instructions for 10 B on Page 3)</small> →	- -		<input type="checkbox"/> Unknown
11	Has the person listed in item 1 or anyone acting on his/her behalf ever filed for or received a Social Security number card before? <input type="checkbox"/> Yes (If "yes" answer questions 12-13) <input type="checkbox"/> No <input type="checkbox"/> Don't Know (If "don't know," skip to question 14.)			
12	Name shown on the most recent Social Security card issued for the person listed in item 1 →	First	Full Middle Name	Last Name
13	Enter any different date of birth if used on an earlier application for a card →	MM/DD/YYYY		
14	TODAY'S DATE MM/DD/YYYY	15	DAYTIME PHONE NUMBER () - - Area Code Number	
16	MAILING ADDRESS <small>(Do Not Abbreviate)</small> →	Street Address, Apt. No., PO Box, Rural Route No. City State/Foreign Country ZIP Code		
17	I declare under penalty of perjury that I have examined all the information on this form, and on any accompanying statements or forms, and it is true and correct to the best of my knowledge.			
17	YOUR SIGNATURE →	18	YOUR RELATIONSHIP TO THE PERSON IN ITEM 1 IS: <input type="checkbox"/> Self <input type="checkbox"/> Natural Or Adoptive Parent <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Other (Specify)	
DO NOT WRITE BELOW THIS LINE (FOR SSA USE ONLY)				
NPN		DOC	NTI	CAN
PBC	EVI	EVA	EVC	PRA
EVIDENCE SUBMITTED		SIGNATURE AND TITLE OF EMPLOYEE(S) REVIEWING EVIDENCE AND/OR CONDUCTING INTERVIEW		
		DATE		
		DCL DATE		

Emergency Guidelines

DGE has a responsibility and mission to ensure that you are safe. In that regard, the following steps have been developed in the event of a natural disaster affecting where you live or a national emergency.

For exchange visitors not yet departed from their home countries:

- All international offices will be contacted explaining the situation.
- The international offices will promptly contact all relevant participants.
- DGE will contact all affected participants by email to follow up and be available for questions.
- DGE will determine if and when it is safe for participants to travel to the U.S. to begin their programs.
- The international offices will maintain contact with DGE and regularly update participants waiting to depart for the U.S.
- DGE will also contact candidates whose programs have not been finalized with all relevant information.

Learn About American Money

During your program stay, many of you have jobs which will require you to assist customers who are paying for goods or services. All of you will be customers yourselves! So --- here's some basic information to acquaint you with the U.S. system.

There are basically four ways customers in the U.S. may pay for a transaction:

1. With cash (bills and coins)
2. With a credit card
3. With a debit card
4. By charging the cost to their hotel room

ONE – PAYING WITH CASH

Unlike the rest of the world, American paper money ("bills") are all the same size and color. This can easily cause problems, so be very careful in noting the amount of each bill. Currently in circulation there are two versions of each bill. The older one has the portrait small and in the center. The newer one has the portrait larger and slightly off center. Both are legal.

Paying with cash is becoming less common, but some businesses are "cash only." For example, busses and public transport, most machines (food/drink vending or photocopies), and very small businesses typically take only cash for payment. Surprisingly, most fast food outlets, shops, cinemas, bars, etc. actually prefer credit/debit cards. Customers also tend to prefer NOT paying in cash as it is much more convenient (and safe) to carry a credit/debit card than a pocket full of bills and coins.

Many currencies around the world are based on the same measure as the American dollar. That is, a single unit is divided into one hundred parts. Just as in your language there are MANY words which mean "paper/coin money" – the most common are *cash* and *currency*.

U.S. paper bills have only six denominations (values):

1. One dollar bill
2. Five dollar bill
3. Ten dollar bill
4. Twenty dollar bill (typically this is the largest bill many businesses will accept – because they do not like to keep lots of change on hand which is necessary if they accept larger denominations)
5. Fifty dollar bill
6. One hundred dollar bill (which is the largest, although many Americans still believe there are larger bills in print)

If you cash your paycheck at a bank or with your employer, it is best to request no bill larger than a \$20 bill.

U.S. coins also have six values:

1. Penny ($1/100^{\text{th}}$ of a dollar) – also called "one cent" (can not be used in machines) – copper color
2. Nickel ($1/20^{\text{th}}$ of a dollar) – also called "five cents" – silver color
3. Dime ($1/10^{\text{th}}$ of a dollar) – also called "ten cents" – silver color – the smallest coin
4. Quarter ($1/4^{\text{th}}$ of a dollar) – also called "twenty-five cents" – silver color
5. Half-dollar ($1/2$ dollar) – rarely used – silver color
6. Dollar (1 dollar) – in several forms, it is generally a gold color and is not common

Americans have not been eager to accept coins larger than a quarter – so, you will likely not see the larger coins during your stay.

PENNY	NICKEL	DIME	QUARTER	HALF DOLLAR
				
1 Cent	5 Cents	10 Cents	25 Cents	50 Cents

When a customer pays with cash, they RARELY have “exact change.” This means that you must subtract the amount of the receipt from the amount of cash you have been given – and then return the difference (“the change”) to the customer. Generally, customers will expect you to count back the change to them --- NOT to just hand it to them in one group.

Luckily, almost always, your computer (“cash register”) will calculate the change owed to the customer. Also, YOU may be the customer, so it is important to be comfortable doing the calculation in your head so you know you have received the correct amount of change.

Common transaction etiquette:

1. After entering all the purchased items into your computer (cash register), tell the customer the total, “Your total is \$15.75 (“fifteen dollars and seventy five cents”).
2. Assuming the customer is paying in cash, he/she will hand you an amount. Generally the customer will pay only with paper money, however sometimes they prefer to also give coins (as most people do NOT like carrying coins and are trying to get rid of them).
3. Count the cash BEFORE placing any of it in your cash drawer (your employer will explain the details of this step – as many do not want ANY cash placed into the drawer until the transaction is complete and the customer has accepted the change you have given as correct). This eliminates a customer waiting until you have placed cash in the drawer to say ... “NO, I gave you a bigger bill!” (and thereby demanding more change in return).
4. Enter the amount given to you into the computer (cash register). As nearly ALL registers are programmed, the machine will now tell you EXACTLY the amount of change to return to the customer. In the few cases this is NOT programmed, you must determine the correct amount yourself (either in your head, with pen/paper, or with a calculator).
5. Remove the change from the drawer. For example, if the customer gave you a \$20 bill for the purchase in step 1, you will say, “your change is four dollars and twenty-five cents.” Then you place the four one-dollar bills and the one quarter in the customer’s hand.
6. Always end the transaction with “Thank you very much.”

Again – your employer will review all the procedures for handling transactions, including cash transactions. You must be extremely careful when handling cash. Most systems require a unique “cashier code” to be in place when you are operating the machine. At the end of your work shift the machine will be balanced and any discrepancies (shortages OR overages) will be your error. Occasionally an employer requires the cashier responsible to PAY for any shortage on his/her machine. Be careful!

TWO – PAYING WITH A CREDIT CARD

This is the most common way customers will pay. If your business accepts credit card payments, there are generally four credit cards accepted:

1. MasterCard
2. Visa
3. American Express

4. Discover

Sometimes a small business will only accept MasterCard and Visa.

Your employers will teach you their systems for processing a credit card transaction. Some employers require a customer to present identification (for example, a driver's license) when presenting a credit card. Some employers do not require the customer to sign the receipt if the transaction is below a certain dollar figure (generally \$25). It is always important to make sure the back of the card is signed. Most always the credit card is processed through a computer which requires an "approval" from that system. The system will likely generate two receipts: one for the customer to sign and return to you to place into the "cash drawer" and the other for the customer to keep as a receipt of the transaction.

In the U.S., customers DO NOT provide a secret code (a P.I.N.) when using a credit card.

THREE – DEBIT CARDS

Debit cards look exactly like a credit card. The difference is that the amount transacted is immediately deducted from the customer's bank account. **In the USA, customers DO have to input a secret code (a P.I.N.) into the processing machine when using a debit card** (you will not see the P.I.N. – it is entered privately). Often you will see a "visa" logo on the front of the card. When you see this logo, you will ask the customer "credit or debit?" This is a shortened sentence which really means --- "Would you like me to process your transaction as a credit or as a debit?" This will affect which buttons you use on your machine. Your employer will review these details with you.

FOUR – CHARGING TO THE HOTEL ROOM

In hotels, resorts, and inns, guests almost always have the option of "charging" the cost of goods and services consumed at the property to their hotel rooms. This allows them to pay one invoice at the end of their stay (guests also are typically required to provide a credit card at "check-in" to secure payment for these incidental charges). Typically the guest must tell you his/her room number and last name. You will verify this with the property's computer system. In other situations, the guest must also present a room key for verification. Your employer will review these details with you

Housing Do's and Don'ts

Housing Assignments and General Information

- Your housing accommodations for the season will be assigned according to your arrival date and your employer.
- Room changes will not be permitted without permission from your employer.
- Furniture cannot be removed from one room to another!

The following are NOT permitted within the housing:

- Candles or incense
- Large-amp stereo units, guitar amps, or beat machines.
- Stacking or moving beds or furniture or using concrete blocks to elevate.
- Firearms, fireworks, explosives, ammunition, BB guns, starter pistols, blow-dart guns, slingshots, martial art devices, survival knives, daggers and switchblades.
- Nails, screws or adhesive hooks on the walls, doors or furniture.

Tenant Responsibility

All ladies and gentlemen should be treated with courtesy and respect at all times. Participants should respect the housing property by keeping it clean and safe.

- All ladies and gentlemen are expected to comply with our Non-Smoking policies- such as in the housing and community.
- All ladies and gentlemen residing within a housing unit are responsible for activities within their unit.

Here are a few Basic Rules to Remember:

- Televisions, stereos, and lights should be turned off when you are not in your room and volumes kept to a considerate level while in the room, regardless of time of day.
- No posters, signs or other items are to be placed on the exterior of your door.
- Clean the bath tub and shower regularly
- Whenever possible, please try to make use of a shower caddy for your products
- No smoking in housing unit, patios/lanais/balconies and communal areas or breezeways i.e. passages

Bed Bug Prevention

Report bed bugs the minute you suspect you have them

Everyday Bed Bug Prevention Tips:

Bed bugs are very successful hitchhikers, moving from an infested site to furniture, bedding, baggage, boxes, and clothing. It is important to be aware of how to prevent bed bugs in your everyday life. Here are some prevention tips to keep in mind regarding how to avoid bed bugs:

- Vacuum suitcases after returning from vacations
- Check your sheets for tell-tale blood spots
- Carry a small flashlight to assist you with quick visual inspections.
- Regularly inspect areas like beds, furniture, couches, etc.
- Reducing clutter in your home to reduce hiding places for bed bugs.

Behavior Problems

- Incidents such as vandalism, fighting, harassment, the pulling of fire alarms in non-emergency situations, destruction of property, theft, intentional injury or other harmful actions will result in the termination of your housing contract and your program. You will be expected to return home immediately.
- If your housing is not maintained in the condition it was given to you, you will be fined for all repairs.
- While you are part of the program and over 21 years of age you are expected to drink responsibly, but alcohol is prohibited in all housing.
- The housing area is to be quiet between the hours of 10pm to 8am.

Guests

****Most employers do not allow guest in housing****

- No overnight guests are permitted in housing.
- If allowed, residents assume all responsibility for their house guests' behavior

Pets and other Animals

- Participants are not permitted to have pets of any kind in housing!

Substance Abuse, Illegal drugs, Alcohol & Tobacco

All housing are drug-free areas. The use, sale or possession of drugs, drug paraphernalia or controlled substances is prohibited.

- Any illegal substance or paraphernalia found in your possession will be cause of your housing contract.
- Underage drinking is prohibited and cause for termination
- If you are 21 years old or older, State law prohibits you from providing alcoholic beverages to underage individuals.
- The housing is a non-smoking area. Tampering with or disabling a smoke detector will result in a fine.

Weapons

Firearms, fireworks, explosives, ammunition or other dangerous weapons are prohibited in housing areas. Weapons may include, but are not limited to: BB guns, starter pistols, blow-dart guns, slingshots, martial art devices, survival knife, daggers and switchblades.

Please show respect to your fellow housemates and to the property you will be living in for the duration of your program.

Bike Safety



Bikes are a health conscious, environmentally friendly, and budget conscious way to travel during your time in the U.S. It also often the only available transport (other than your feet)!

To make sure that you are safe while riding your bike, you should make sure to always follow the tips below.

1. Follow the Rules of the Road.
2. Be Visible.
3. Be Predictable.
4. Anticipate Conflicts.
5. Wear a Helmet.
6. Have a front AND rear light – and keep them on!
7. Have identification with you, including your insurance card and contact phone numbers
8. Know your route AND alternate sides which will provide less car traffic during “rush hour.”
9. Lock your bike whenever you are not with it!
10. Know your liability if you are renting a bike. What will you have to pay if it is stolen or damaged

More information about bike safety and the tips above can be found at <http://www.bikeleague.org/resources/better/>.

We cannot stress enough the importance of wearing a helmet. American's are not always used to bikers so it is important that you protect yourself by wearing a helmet. Every year hundreds of people lose their lives in biking accidents and thousands more are injured- always be safe while riding your bike.

Marijuana Laws in the United States

Although marijuana use is legal in certain states, under state law, it remains **ILLEGAL** under federal law. You must not consider that you are safe from law enforcement, even if you are in Colorado or Washington state where recreational use is legal (with restrictions) under the laws of those two states. Marijuana use is illegal under U.S. Federal law.

This is confusing to have contradictory laws. Generally speaking, federal law has priority over state law. However, some types of law fall into a gray area. A recent example are the medical and recreational marijuana laws, which make some applications of marijuana legal in some states. Although the U.S. Attorney General has stated that federal prosecutors will not make enforcement of the marijuana laws a priority in those states, buying/selling/using marijuana remains illegal in the U.S. and offenders are subject to federal prosecution. In other words ... do not buy or use marijuana anywhere in the U.S.

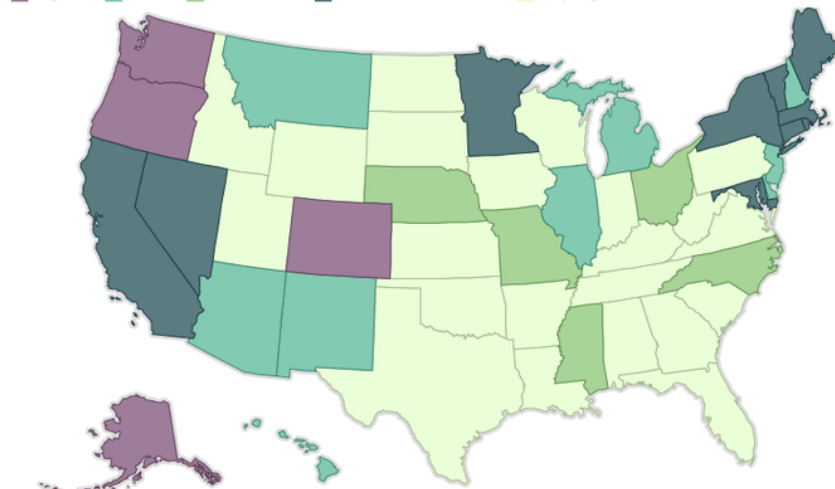
You must adhere to the alcohol and drug use policy of your host company. Host companies may terminate your job/training due to alcohol use (coming to work intoxicated or drinking alcohol at work) or drug use. Host companies may legally require a drug test (at their expense). Failing or refusing such a drug test will cause your termination from your job/training.

H

ere is a listing of marijuana use laws by state. To repeat: any use of marijuana is illegal under U.S. Federal law.

Status of marijuana laws in the United States

Legalized Medical Decriminalized Medical and decriminalized Fully illegal



Source: NORML, Drug Policy Alliance, and the Marijuana Policy Project

V

Brochure: Are You Coming To The U.S. To Work or Study?

This brochure explains your rights while you are visiting the U.S.
Read it carefully – and share with other internationals you meet during your program.



Are You Coming To The United States Temporarily To Work Or Study?

We Are Confident That You Will Have An Interesting And
Rewarding Stay. However, If You Should Encounter Any
Problems, You Have Rights And You Can Get Help!

You Have the Right to:

- Be treated and paid fairly;
- Not be held in a job against your will;
- Keep your passport and other identification documents in your possession;
- Report abuse without retaliation;
- Request help from unions, immigrant and labor rights groups and other groups; and
- Seek justice in U.S. courts.

These rights, and others, are explained in this pamphlet.



**If you are mistreated or your rights are violated,
call these toll-free numbers:**

National Human Trafficking Resource Center's
24 Hour Toll-Free Hotline
1-888-373-7888

(Run by a non-governmental organization)

Trafficking in Persons and Worker Exploitation
Task Force Complaint Line

(Monday – Friday, 9am-5pm Eastern Time)

1-888-428-7581

(Run by the U.S. Department of Justice)

If you are in immediate physical danger, Call 911



For more on your rights to be treated and paid fairly at work, see page 5

For more on your right not to be held in a job against your will, see page 7

This pamphlet was created as a result of
a U.S. Federal law, Public Law 110-457.

The U.S. Government has issued this
pamphlet to honor the rule of law and
uphold the dignity of all who come to
this country. The U.S. Government
is committed to combating human
trafficking and labor rights violations.



REMEMBER!!

There Are Ways to Protect Yourself

- Keep your passport in a safe, easily accessible place at all times;
- Keep copies of your passport, visa, and employment contract in your home country with relatives or friends;
- Always have the phone number of your home country's embassy;
- Keep this pamphlet handy so that you can refer to it once you are in the United States;
- Keep a record of all the days and hours that you work, and the amount and date of each payment that you receive; and
- Call the National Human Trafficking Resource Center Hotline at 1-888-373-7888 (24 hours) or the Trafficking in Persons and Worker Exploitation Task Force Complaint Line at 1-888-428-7581 (weekdays 9am-5pm Eastern Standard Time) if you need help.



An Overview of the Nonimmigrant Visa Process

What is a nonimmigrant visa?

A nonimmigrant visa is a U.S. government document that permits individuals who travel to the United States to request entry for a particular purpose; for example, to work or to study.

The nonimmigrant visa process involves two important steps:

1. Applying for the visa at the appropriate U.S. embassy or consulate abroad; and
2. Presenting the visa to an immigration inspector at a U.S. port of entry.

What are the important parts of my documentation?

1. The visa. It is located in your passport and shows your picture and visa expiration date. If your visa expires, you cannot reenter the United States on that visa until it is renewed.
 - If you have an employment-based visa, the visa will include the name of the employer who is sponsoring you to work in the United States.
 - Your temporary work visa **does not give you permission** to work for **any** employer that you choose—it is permission to work **only** for the employer listed on your visa application. In rare cases, it may be possible to change employers.
 - This does not mean you have to continue to work for your employer if the employer is abusing or exploiting you.
2. The I-94 Card. This is a white card provided to you when you enter the United States. Your I-94 card shows the period of time that you are allowed to remain in the United States.
Do not lose this card!

TIP

Before you travel to the United States, **make two copies** of all important documentation, especially your passport (with visa), your contract, and your identity documents. Give one set of these copies to someone you trust in your home country. When you arrive in the United States and receive an I-94, make one copy of the I-94 in case you lose the original. Keep these documents in a safe place.

TIP

Once you arrive in the U.S., **keep your passport and other travel documents in a safe place where you can access it at all times!** It is illegal for your employer to take your passport away from you!



Your Workplace Rights in the United States

There are several protections that are specific to the type of visa you receive. These are outlined below by visa category.

A-3, G-5, and B-1 domestic employee visas

- If you work for a diplomat (A-3 visa) or a representative of an international organization (G-5 visa), or if you are a domestic employee holding a B-1 visa, your employer must provide you with an employment contract that complies with U.S. law.
- The contract must include the following provisions:
 - An agreement by your employer not to keep your passport, employment contract, or other personal property from you;
 - An agreement by your employer to abide by all laws in the United States;
 - An explanation of how much you will be paid for your work, as well as how frequently you will be paid; and
 - A description of your work duties, weekly work hours, holidays, sick days, and vacation days.
- Make sure that you understand the terms of the contract. If you cannot understand the language in which the contract is written, ask someone you trust to read the contract to you in a language that you understand. **Do not sign anything that you do not understand!**
- When you apply for the visa, a U.S. Consular Officer will meet with you and confirm that your contract complies with U.S. law. Do not hesitate to ask the U.S. Consular Officer any questions. Your employer is not supposed to be present when you meet with the Consular Officer.
- If you sign a contract that violates your rights, or if your employer does not do what the contract says, call the hotlines listed in this pamphlet immediately. They can help you find a lawyer who can help explain your rights in this situation.

H-1B and H-1B1 visas for performing services in specialty occupations

- If you are coming to the United States to perform services in a specialty occupation or as a fashion model, please refer to www.Travel.State.gov for more information regarding your rights and ability to change employers.

H-2A temporary agricultural worker visas

- If you are a temporary agricultural worker, you must receive a written description of the terms of your employment no later than the first day of work. This document must contain detailed information about the benefits, wages, housing, work duration, and transportation benefits that your employer will



provide.

- You are entitled to payment at or above a wage that is set by the government. This rate applies whether you are paid hourly or by piece rate.
- You do not have to pay either U.S. social security taxes or fees to a labor recruiter in your home country.
- Your employer must provide clean and safe housing at no charge.
- Your employer must reimburse you for transportation costs from your country to your place of employment, but only after you complete half the contract period; and your employer must pay for your return transportation costs for your trip home after completion of the contract.
- You are entitled to guaranteed work for at least 3/4 of the number of workdays stated as the contract period unless you are displaced by a U.S. worker during the first half of the contract period.

H-2B temporary non-agricultural worker visas

- If you are a temporary non-agricultural worker, you are entitled to payment at or above the prevailing wage, which will be at least the federal, state, or local legal minimum wage, but may be higher. This rate applies whether you are paid hourly or by piece rate.
- Your employer must provide return transportation costs for your trip home if your work ends or you are dismissed for business reasons unrelated to job performance before the end of your contract.
- You are usually entitled to terms and conditions of employment that are normal for similarly employed U.S. workers in the area.
- You should never have to pay fees to a labor recruiter in your home country.

J-1 exchange visitor visas

- Unless your exchange program is sponsored by the Federal government, the program must be a minimum of three weeks duration. The Form DS-2019, the basic document required to apply for a J visa, reflects the category of exchange and the program dates. Depending on the category of exchange, there may be other documents and/or contracts which cover the terms of your exchange program.
- Your sponsor's advertisements must be accurate and explain all costs, conditions, and restrictions of the exchange program. Your sponsor must also give you an orientation and provide you with information about:
 - the J-1 program and a description of the specific program in which you are participating and its rules;



- travel and entry into the United States;
- housing;
- fees, and costs, including living expenses, healthcare, and insurance costs;
- life and customs in the United States;
- local resources;
- your sponsor's address and the name and phone number of the person responsible for you in the United States;
- contact information for the Exchange Visitor Program Services of the Department of State; and
- The Department of State's Exchange Visitor Program brochure;
- If you are entering on a Summer Work Travel program and do not have pre-placed employment, your sponsor must assist you in locating employment if you have not found employment within the first week following your arrival, and insure that you receive pay and benefits commensurate with those offered to your American counterparts.
- If your J-1 visa is for a training and internship program:
 - Your sponsor must interview you in person, by telephone or by web camera;
 - Your sponsor must have a Training/Internship Placement Plan (Form DS-7002) in place before your visa paperwork is submitted. This Form includes a written statement of any stipend you will be paid, and a summary of the training objectives of the program.
 - Your sponsor must give you a written statement of the costs and fees you will have to pay, and an estimate of living expenses in the United States.
 - Your training/internship must be at least 32 hours per week; and
 - If your training/internship is in agriculture, your working conditions and wages must meet strict federal requirements for agricultural workers.
- Your sponsor must assure that you have medical insurance coverage, though your sponsor need not provide or pay for this coverage.
- If you work in the United States, you should apply for and receive your own Social Security number, and your employer must report all tax withholdings using this number.
- If you are bringing your spouse or minor children with you on a J-2 visa, they may apply for work authorization only if the income is not necessary to support you.

For more information on visa categories and U.S. entry procedures, see the Web site of the U.S. Department of State:

www.Travel.State.gov



Your Rights Regardless of Visa Status

There are also many **rights you have regardless of your visa status**. If any of these rights are violated, you can report the violations to a government enforcement agency. In most cases, you can also bring a lawsuit to attempt to recover your losses, without fear of being punished.

1. Your Right Not to Be Retaliated Against

- It is unlawful for your employer to try to punish you, for example, by threatening to report you to immigration or the police if you try to enforce your rights! If your employer threatens you at any time, **seek help immediately**. Remember, your safety comes first!

2. The Right to Be Paid

- You have the right to get paid for **all work you do, in the same manner as U.S. workers**.
- You have the right to earn at least the federal legal minimum wage \$6.55 per hour, and \$7.25 per hour starting on July 24, 2009, in the same manner as U.S. workers. Also check
 - The minimum wage for the **state** in which you work. If that wage is higher, you have the right to be paid the higher amount.
 - Your employment contract, which may obligate your employer to pay a higher amount.
- Most workers in the United States are entitled to overtime pay of one and a half times the amount of their wage for any hours worked over 40 hours per week. For example, if your regular wage rate is \$10 per hour, your employer may be required to pay you \$15 for each hour you work above 40 hours in a single week.
- If your employer takes money from your paycheck, this is called a deduction. Many deductions are illegal if they diminish your legal wage rate. For example, an employer usually may not deduct for housing (with some visa classifications, housing must be provided free of charge), most uniforms, safety equipment, or recruitment fees.

TIP

Make sure to keep a written record of **all the time that you work**. Get a notebook and write down all of the days and hours that you worked, how much you were paid, the days you received a payment, any deductions taken from your paycheck, and the reasons for those deductions.

3. Your Right Not to be Discriminated Against

- As an employee, you have the right to not be treated differently or badly at work



- If you mix or apply pesticides that require you to use protective equipment (like coveralls or a mask or respirator), your employer must give you equipment that is clean and in good condition.
- **Medical Emergencies:** In the case of an emergency, call **911** and ask for an ambulance.
- Your expenses may be paid for, so you should tell your employer as soon as possible so the employer can file the necessary paperwork.
- When you are at the doctor or clinic, ask for copies of the paperwork regarding your illness or injury.

6. Your Right to Join a Union and Bargain Collectively

- With few exceptions, all workers in the United States have a right to form and join a union, regardless of their immigration status under federal law. Your employer cannot take action against you for doing so. This means you can:
 - Join with other workers to improve wages and working conditions;
 - Attend public speeches, rallies, and demonstrations; and
 - Join a union or other worker organization.

7. Your Right to More Protections Under State Law

- Call the hotlines listed in this pamphlet for a referral to organizations that can tell you about your rights in the state where you are working.

8. Your Right to Leave an Abusive Employment Situation

- You do not have to stay in your job if your employer is abusing you.
- But, if you came to the United States on an employment-based visa and you leave your employer, your visa status will no longer be valid. However, depending on the type of visa you have, you may be able to change visa categories or employers. You may also be able to remain in the United States legally to pursue a legal claim.
- You may also make a formal complaint or file a lawsuit against your employer while you are still working. There are severe penalties for an employer who tries to punish workers because they pursue their rights.
- If you are experiencing problems with your current employer, contact the hotlines listed in this pamphlet. They will be able to connect you with a local organization that can speak with you about your options.

TIP

You have rights in the United States and no one can take those rights away from you. There are hundreds of organizations that can help. Don't be afraid to ask for help to protect your rights.



Human Trafficking

1. What is human trafficking?

Human trafficking is among the most terrible workplace abuses that an individual in the United States could encounter. Human trafficking occurs whenever a person is recruited, transported, or kept against his or her will for purposes of exploitation. For a full definition of human trafficking, please see www.state.gov/g/tip (see Legislation—Trafficking Victims Protection Act). The following are some warning signs that may indicate human trafficking:

Threats and Fear:

Employers, and people who help employers, may use threats and other intimidating acts to make you and other workers feel too afraid to try to leave. For example:

- Beatings, physical abuse, or sexual abuse;
- Threats of beatings, physical abuse, or sexual abuse;
- Locking in or restraining a worker;
- Threats of harm to the worker or the worker's family if the worker tries to leave, complain of mistreatment, report the situation to authorities, or seek help;
- Threats of being deported or arrested, or of being turned over to police for trying to leave, complain, report, or seek help for the worker's situation;
- The employer, or someone working with the employer, has harmed or threatened other workers who have tried to leave, complain, report, or seek help; or makes threats that any worker who tries to escape will be found and brought back.

Rules and Controls:

Employers, and people who help them, may use rules and controls to make it harder for you and other workers to leave, complain about mistreatment, or seek help. For example:

- Rules against leaving the workplace, or strict rules about where you can go when not working;
- Rules against holding onto your own passport, visa, birth certification, or other identification documents;
- Denial of adequate food, sleep, or medical care; or
- Preventing or restricting you from communicating freely with family, other workers, or others outside the workplace.



Deception and Lies:

Employers, and people who help them, may also use deception and lies. For example:

- False promises about working conditions, living conditions, or pay;
- Telling you that you have no rights;
- Telling you that you will not be believed if you try to seek help; and
- Instructing you to lie about their identity.

TIP

Before leaving for the United States, talk with migrant worker organizations or former migrant workers for names and numbers of persons or organizations you can contact if you have problems or questions when you are in the United States.

2. What should I do if these things are happening to me?

- If any one of these things is happening to you or you are in a dangerous situation, **get help immediately** by calling 911, the National Human Trafficking Resource Center (1-888-373-7888), or the Trafficking in Persons and Worker Exploitation Task Force Complaint Line (1-888-428-7581). They can help refer you to a local organization that help victims of human trafficking in your area.
- If you are in physical danger, you should call **911** to reach the Police. If you call the police, show them this pamphlet and tell them about the abuse that you have suffered.

3. Will I be deported if I report the abuse?

There are programs to protect people who report abuse. You should not be afraid to seek help even if you have immigration concerns. You should consult with an immigration attorney who does not work for your employer. The hotline can help you find someone to consult.

- If you believe you may be a victim of human trafficking or of another serious crime, including rape or sexual assault, you may be entitled to a different nonimmigrant visa, like a T visa (for trafficking victims) or a U visa (for victims of other serious crimes). These visas were created to provide protection for certain crime victims worried about their immigration status. Many people are unfamiliar with these visas and you may need to tell people assisting you about them.

4. What services are available for victims of human trafficking?

- If you are a victim of trafficking in the United States, you may be eligible for benefits, services, and immigration remedies under federal or state programs.
- Many organizations can help you access these services, which include medical care, mental health care, housing, dental care, legal advocacy for immigration and other legal needs, employment assistance, and public benefits.



Know Your Rights

Call one of the hotlines listed in this pamphlet if you need help

You are receiving this pamphlet because you have applied for a nonimmigrant visa to work or study temporarily in the United States. The purpose of this pamphlet is to help you understand your rights when you arrive in the United States. Even though you will be living in the United States only temporarily, you will still have many of the basic workplace rights that U.S. citizens and residents have.

This pamphlet gives an overview of your basic workplace rights. Understanding your rights will help you to protect yourself from abuse. Keep this pamphlet with you in the United States in case you need to reach someone for help.

This pamphlet was also created to help you protect yourself against the most serious abuses, such as human trafficking. Human trafficking is a form of modern-day slavery where an employer or other individual, through physical or psychological abuse, causes an individual to feel that he or she is not free to leave the situation. **Recognizing that you are in an abusive employment situation is the first step toward getting help.**

If you arrive in the United States and have problems at work, you should seek help immediately. Do not believe your employer if he or she says that you do not have legal rights in the United States. Do not accept legal advice from your employer, contractor, or recruiter. Only an attorney representing you should give you legal advice.

If you believe your rights are being violated, the hotlines listed in this pamphlet can help you reach local organizations that can provide further assistance. **Do not be afraid to contact these organizations! They are here to help you.**

This pamphlet is not a substitute for legal advice. There are many different types of temporary work and educational visas, and you should not be afraid to ask for more information about your visa.

IF YOUR RIGHTS ARE VIOLATED, CALL THESE TOLL-FREE NUMBERS:

National Human Trafficking Resource Center
1-888-373-7888
(24 hours)

Trafficking in Persons and Worker Exploitation Task Force Complaint Line
1-888-428-7581
(Monday – Friday, 9am-5pm Eastern Time)

End of Program Requirements

Congratulations --- your program is nearly complete!

We hope you have enjoyed you time in the U.S.!

It is important to complete the following details BEFORE your program end date.

- (1) If you are departing the U.S. after your program end date (check your DS2019 to confirm this date) it is important to purchase additional insurance to cover that period. Mail a check or money order to DGE at least 10 days before your end of program date.
 - 1 day – 14 days = \$27.50
 - 15 days – 1 month = \$55
- (2) Email DGE to confirm your exit date from the U.S and to provide flight information.
 - This must be done before your program end date (based on your DS 2019).
 - You must exit the U.S. no later than 30 days after your program end date.
- (3) Complete your End-of-Program Evaluation of your experience that will be emailed to you or can be found on our website.
- (4) Ask your employer if he/she is willing to write you a “Letter of Recommendation.”

It is your responsibility to complete each item.

We have enjoyed being your sponsor this season and wish you ALL life's best as you return home