

## J-1 Academic Training Request Form

International Student & Scholar Services (ISSS)

## **STUDENT INFORMATION**

Student Name	
CWID/SEVIS ID	
Email Address	
Phone Number	
Expected Graduation Term (Semester & Year)	
Type of Academic Training Requested (Pre vs. Post-Completion)	
EMPLOYER I	NFORMATION
Start Date:	End Date:
Employer	
Position Title	
Employer Address	
Employer City	
Employer State	
Employer Zip Code	
ACADEMIC ADVISOR INFORMATION	
Advisor's Name	
Advisor's Contact Information	
Advisor's Signature	
REQUIRED DOCUMENTS Submit the J-1 Academic Training Request Form with the following documents to isss.application@stevens.edu:  a. Academic Advisor Recommendation Letter  b. Letter of Expected Completion if the request for academic training is after completion of studies.  c. Proof of financial support if employment is unpaid.  d. Proof of continued health insurance during the training program for your and any J-2 dependents	
As a reminder, employment cannot commence until authorized to do so within the authorized dates.	
I have read and understand the rules and regulations pertaining to Academic Training, and I confirm that I am clear about the requirements pertaining to my employment options.	
Signature	Date