ATTACHMENT A

California State University Northridge

INTERNATIONAL VISITING SCHOLARS PROPOSAL FORM

NOTE: Completed form should be submitted at least 3 months prior to the start of the proposed visit (earlier is better).

Name of the Sponsoring Department/Program: ________________________________

Name of the Sponsoring College: ________________________________

Name and Contact Information for the Faculty Member or Administrator the College has Assigned as the Primary Contact and Host for this Visiting Scholar:

Name: _____________________________________________________________________

Title: _____________________________________________________________________

Email: ________________________________ Phone: _____________________________

Section 1 – Purpose and Duration of the Visit (to be completed by the sponsoring CSUN department/college)

1A – WHAT IS A J-1 SCHOLAR? The Exchange Visitor Program, administered by the U.S. Department of State allows the University to use the J-1 Exchange Visitor visa status to invite or employ foreign professors, research scholars, and short-term scholars in the United States temporarily.

Minimum academic credentials

Professor and Research Scholars are expected to have appropriate academic or similar credentials. As a general policy, a prospective exchange Professor or Research Scholar would normally be expected to have at least a bachelor’s degree with appropriate experience in the field of endeavor. For example, the Department of State’s Foreign Affairs Manual [9 FAM 41.62 N4.8 (d)] describes the minimum qualifications for the Research Scholar as follows: “Minimum qualifications for this category are a bachelor’s degree with appropriate experience in the field of in which research is to be conducted.” Although the FAM does not contain such guidance in the sections dealing with the Professor or Short-Term Scholar categories, the bachelor’s degree minimum is most likely what the Department of State would expect program sponsors to require as a minimum academic credential for those categories as well.

*FAM=U.S. Department of State Foreign Affairs Manual  
NAFSA's Advisor Manual of Federal Regulations Affecting Foreign Students and Scholars
Select the appropriate classification

☐ Visiting Professor
A professor is an “individual primarily teaching, lecturing, observing, or consulting at post-secondary accredited educational institutions, museums, libraries, or similar types of institutions. A professor may also conduct research, unless disallowed by the sponsor” [22 CFR* 62.4(e)].

☐ Research Scholar
A research scholar is an “individual primarily conducting research, observing, or consulting in connection with a research project at research institutions, corporate research facilities, museums, libraries, post-secondary accredited educational institutions, or similar types of institutions. The research scholar may also teach or lecture, unless disallowed by the sponsor” [22 CFR* 62.4(f)].

☐ Short-term Scholar
A professor, research scholar, specialist, or a person with similar education or accomplishments coming to the United States on a short-term visit for the purpose of lecturing, observing, consulting, training, or demonstrating special skills at research institutions, museums, libraries, post-secondary accredited educational institutions, or similar types of institutions’ [22 CFR 62.4(b)]. Examples include educators, scientists, research fellows, writers, and museum administrators. The maximum duration of stay is limited to four months, and short-term scholars are not permitted to extend their stays.

*CFR=Code of Federal Regulations
NAFSA's Advisor Manual of Federal Regulations Affecting Foreign Students and Scholars

1B – THE PURPOSE OF THE VISIT: (Attach your response on a separate sheet.)

1) What is the reason for inviting this visiting scholar? How do his/her work and scholarly accomplishments add to the department’s and/or college’s instructional and research strengths? How will inviting this scholar advantage CSUN students? (500 words or less)

2) What are the specific research and/or instructionally-related assignments for the visiting scholar during his/her stay? (Be specific in outlining the planned project/s for each semester of the planned visit)

3) The purpose of the program is to provide foreign nationals with opportunities to participate in educational and cultural programs in the United States and return home to share their experiences. Please indicate what specific cultural programs/activities will be incorporated to the visitor’s experience while in the U.S.(Some examples of cultural programs and activities could be attending lectures by U.S. scholars/faculty/students; providing lectures to U.S. faculty/staff/students; attend performances which expose visitors to the U.S. culture; and other activities that promote cultural exchange.)

1C – DATES OF THE PROPOSED VISIT:
_________________________ (mm/dd/yyyy) to ______________________ (mm/dd/yyyy)

The planned dates of the visit should be in keeping with the purpose of the visit and the assignments as outlined. (NOTE: Please allow at least three months prior to the planned start date of the visit in order for the Visiting Scholar to get an appointment with the Consulate.)
Section 2 – Financial and Support Plans (for completion by the sponsoring CSUN department/college)

2A -- HOUSING: While the sponsoring college/department may not be providing housing for the visiting scholar (who may, for example, have those arrangements covered by their home institution, by personal funds, or the like), it is important that the sponsoring CSUN department/college check to ensure that housing arrangements are in place (so that the visiting scholar does not arrive with mistaken expectations and/or no housing arrangements in place).

2B – THE BUDGET: Please provide a budget for the planned visit, and indicate the dollar amount for each item to be provided. The budget should include all committed resources. Though necessary expenses may vary from one visitor to another, typical budget items include the following: compensation (if any) for the visiting scholar/instructor; general office-expense or lab-funding allowance; office and/or lab space; office and/or lab equipment; library access; access to designated campus facilities (e.g., CSUN Recreation Center); student and/or teaching assistant/s; and housing and living expenses. If there are specific expenditures involved (beyond allocation of resources – office, existing equipment, etc.), please indicate the sources of the funding, e.g., general fund, Trust, University Corporation grant, and/or grants held by the visiting scholar or made by his/her home institution.

NOTE: If the grant funding is managed by University Corp, please include the project ID and account number. (For University Corp funding verification form, see page A-4.)

IMPORTANT: before submission, the proposed budget should be reviewed by the sponsoring college’s MAR. (For MAR review form, see page A-6.)

2C – SOURCES OF SUPPORT FROM THE VISITING SCHOLARS: CSUN requires documented proof of financial responsibility for visiting scholars. You must show a minimum of $18,720 for each year (i.e., $1,560 per month).

If CSUN is not providing financial support, in addition to providing information below, please attach a letter from the proposed Visiting Scholar’s home institution (college/university), or sponsoring organization. If self-support, please provide a personal bank statement(s) certifying funding sources(s) and amount(s) in dollars.

<table>
<thead>
<tr>
<th>Funding Source</th>
<th>Amount per month (USD)</th>
<th># of hours</th>
<th>Hourly Rate</th>
<th># of Months</th>
<th>Total Amount</th>
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</thead>
<tbody>
<tr>
<td>CSUN General Fund</td>
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<td>Account #</td>
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<td>The University Corp</td>
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<td>U.S. Government agency funds to this Exchange Visitors:</td>
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<td>Name of Agency:</td>
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<td>International Organization: [e.g. UN, WHO, NATO] funds to this Exchange Visitor: Name of Agency:</td>
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<td>Exchange Visitor’s Government:</td>
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<td>Name of Agency:</td>
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<td>Other organizations/institutions in the U.S. or abroad:</td>
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<td>Names(s):</td>
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<tr>
<td>Personal funds (include bank statement):</td>
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</table>
2D – **BENEFITS:** As part of resource allocation, what type of benefits do you intend to provide?

- [ ] No Benefits - for employees who work less than 29 hours a week and/or have an appointment of less than 3 months
- [ ] Benefit Category Group A – for salaried employees working an average of 20 or more hours a week
  - Vacation
  - Sick Leave
  - Personal Holiday
  - Paid Holidays
  - Retirement Benefits (under specific conditions)
  - Tax Sheltered Annuity Plan

- [ ] Benefit Category Group B - for employees working an average of 30 or more hours a week
  - Vacation
  - Sick Leave
  - Personal Holiday
  - Paid Holidays
  - Health Insurance
  - Dental Plan
  - Vision Plan
  - Life Insurance/AD&D
  - Retirement Benefits (under specific conditions)
  - Tax Sheltered Annuity Plan

2E – **HEALTH CARE COVERAGE:** Proof of health insurance (*including provisions for evacuation and repatriation*) is required for the research period. If the visiting scholar wishes, this insurance can be secured through CSUN prior to arriving in the U.S. If secured elsewhere, please provide evidence of coverage. (i.e., submit a copy of policy provisions).

2F – **Human Resources Approval from the CSUN University Corporation:**

Print Name: ___________________________________________________________

Title: ________________________________________________________________

Signature: ___________________________ Date: ______________

_________________________________________________________________________

2G -- **Budget Verification from the CSUN University Corporation if the planned visit will use CSUN grant funds managed by the CSUN University Corporation:**

The signature of the University Corporation representative, below, confirms that the grant funds as proposed in the budget above are available and are being appropriately used for the proposed scholarly visit as outlined in sections 1 and 2 above

Print Name: ___________________________________________________________

Title: ________________________________________________________________

Signature: ___________________________ Date: ______________
Section 3: Information about the Proposed Visiting Scholar:

3A -- WHERE TO SEND THE OFFICIAL INVITATION: Complete mailing address, home telephone and fax number to which the letter of invitation and DS-2019 Form should be sent via UPS Express. If other handling is desired, please specify the person to contact or procedure to be followed:

Organization Name: ____________________________________________________________

First Name: ___________________________ Last Name: _____________________________

Address 1: ___________________________________________________________________

Address 2: ___________________________________________________________________

City: ___________________________ Country: ___________________________________________________________________

Postal Code/Zip Code: __________________________________________________________

Cellular Phone: ___________________________ Landline Home Phone:____________________

Office Phone: ___________________________ Fax: ________________________________

Email Address: ________________________________________________________________

3B -- MORE DETAILED INFORMATION ON THE VISITING SCHOLAR

Last Name (Family Name): ______________________________________________________

First Name: ___________________________ Middle Name: ____________________________

Male: ☐ Female: ☐ Birth date (month/day/year): ________________________________

Does the Visiting Scholar have a Ph.D.? Yes: ☐ No: ☐

Visitor's home academic or administrative affiliation (department, school, University, etc.):
__________________________________________________________________________

City of Birth: __________________________________________________________________

Country of Birth: __________________________________________________________________

Country of Citizenship: __________________________________________________________________

Country of Legal Permanent Residence: __________________________________________________________________

3C – ENGLISH PROFICIENCY OF PROSPECTIVE EXCHANGE VISITORS

A program sponsor’s “screening and selection system” must ensure “The exchange visitor possesses sufficient proficiency in the English language to participate in his or her program.”
22 CFR 62.10(a)(2) [10]
Section 4: CSUN Approval Signatures

**DEPARTMENT CHAIR’S SIGNATURE**: The signature of the sponsoring department’s/program’s chair/coordinator indicates approval of the plan and the department’s readiness to assume the responsibilities involved in sponsoring and hosting this proposed Visiting Scholar.

Print Name: _____________________________________________________________

Signature: _____________________________________________ Date: __________

**MANAGER OF ACADEMIC RESOURCES**: The signature of the sponsoring college’s MAR, below, indicates that all elements of Section 2 have been reviewed.

Print Name: _____________________________________________________________

Signature of the College MAR: __________________________________________ Date: __________

**COLLEGE DEAN’S SIGNATURE**: The signature of the sponsoring department’s/program’s dean indicates the college’s support for this proposed Visiting Scholar, confirmation that the proposed visit will be of significant benefit to CSUN and the college’s faculty and students, and that the college confirms its willingness to provide the resources and support needed for this Visiting Scholar as outlined in Sections 1 and 2, above.

Print Name: _____________________________________________________________

Signature: _____________________________________________ Date: __________

**THE TSENG COLLEGE**: The signature of the Associate Dean of the Tseng College confirms that this form has been completed in keeping with CSUN procedures and provides the information necessary to approve the request and process a formal letter of invitation.

Print Name _____________________________________________________________

Signature: _____________________________________________ Date: __________

**CSUN PROVOST**: The signature of the Provost (or designee) indicates that the Provost has been informed of this planned visit and supports its moving forward as described above.

Signature: _____________________________________________ Date: __________

Return Completed form to:
CSUN International Visiting Scholar
Office of the Associate Dean
The Tseng College
Bookstore Complex, Room 230
Campus Mail Code: 8362
Phone: 818-677-7372