J-1 Academic Training Information

Academic Training is work, training, or experience related to a student's field of study. Appropriate activities vary over disciplines. For example, postdoctoral training in biochemistry might consist of paid research at one location with one faculty adviser, where academic training in music may involve a number of paid or unpaid teaching or performance opportunities. Academic training may involve sequential or simultaneous activities, either paid or unpaid, with several employers, provided the application and approval procedures are followed for each employer and activity, and the time limits are not exceeded.

- **Non-Degree** students can only be authorized for Academic Training for the length you have been in the U.S., up to 12 months. For example, if you have been here for 3 months your DS-2019 can only be extended for 3 months.
- **Degree seeking** students can be authorized for up to 18 months of Academic Training.
- **PhD** students can be authorized for up to 36 months of academic training.

**In order to be approved for J-1 Academic Training there are 3 steps:**

- Receive a job offer letter from your employer – see page 3 for Model Employers Letter
- Receive a completed Recommendation Request for Academic Training from your academic advisor/major professor – see page 2
- Turn in both of the letters and Recommendation Request form to an advisor with ISSFS
- The final step in this process is for your DS-2019 to be extended for the length of your Academic Training and to receive a letter from the ISSFS authorizing your Academic Training work authorization for the appropriate length of time.

**Reminders:**

- You are required to update the IPO with your current address within 10 days of moving.
- Your Academic Training employer cannot be changed without authorization.
- You are required to inform ISSFS of any changes in dates of employment.
Advisor’s Recommendation for Academic Training

This form is a requirement to grant a J-1 student permission to work outside of UI, either during or after completion of studies. Only the faculty member should complete this form in its entirety.

Student Name: ___________________________________________       Student ID: __________________________

Student’s Field of Study: __________________________________________

Program Completion Date: _________________________________________

Date listed above is:       [☐] Thesis defense date
                          [☐] Graduation
                          [☐] Last day as registered student
                          [☐] Other (explain) ________________________

Description of Academic Training/Employment:

Employer: __________________________________________________________
Location: __________________________________________________________
Job Title: __________________________________________________________
Number of Hours per Week: _____________ Dates of Training: From ____________ to _____________

What are the goals and objectives of this specific academic training program?

How does the training relate to the student’s field of study?

Why is this an integral or critical part of the academic program of the student?

I certify that the above employment is related to the student’s field of study, and recommend that you authorize academic training.

___________________________________________ Date: ___________________________
(Signature of Academic Advisor/Major Professor)

Academic Advisor’s Name & Title: ____________________________________________
MODEL EMPLOYER’S LETTER FOR J-1 “ACADEMIC TRAINING”

The employer should print on letterhead.

[Date]

[Student's Name]
[Student's Address]

RE: [Name of Company]'s Offer of Employment to You

Dear [Student’s Name]:

This is to confirm that [Name of Company] is offering you employment as a [Title of Position] for [X] months starting on [Date]. This employment will serve as “academic training” [pick one: following or in concurrence with] your degree program at the University of Idaho. The location of employment will be [location]. Your training supervisor will be [Name of Supervisor], [Title of Supervisor]. You will be expected to work full time and will be paid an annual salary of $[salary].

The duties of your position will be as follows:
[insert duties]

Welcome to [Name of Company].

Sincerely,

[Signer’s Name]
[Signer’s Title]

[Employer’s Name and Address]