Office of
GLOBAL ENGAGEMENT
International Services

Section I. Purpose & Required Documents

Department of State regulations require all participants to check in once they arrive to the U.S. so that SEVIS records can be updated to reflect Active status. Please complete this form in its entirety and provide the documents below to is@clemson.edu so we can take the required action on your SEVIS record. **Please note that J-1 exchange visitors employed by the University must first receive the confirmation email from our office that their SEVIS records have been activated before applying for a Social Security Number.**

Required Documents:

1. Completed Form IS-205 (this form)
2. Copy of J visa page within passport
3. Copy of DS-2019 with consular notes (bottom-left section of the DS-2019)
4. I-94 record (obtain it here)
5. Certificate of insurance coverage
6. Summary of insurance coverage benefits (See Section IV for requirements)

Section II. Personal Information

Family/Surname: _____   First Name: _____

SEVIS ID: _____   U.S. Phone Number: _____

U.S. Address: _____

Section III. Emergency Contact Information

Family/Surname: _____   First Name: _____

Email Address: _____   Phone Number: _____

Country of Residence: _____

Section IV. Insurance Compliance

Department of State regulations require all J-1 participants and their J-2 dependents to maintain health insurance throughout the entire duration of the J program. Failure to maintain health insurance is a violation of status and will subject all participants and their dependents to depart the U.S. Your insurance coverage must meet the federal regulations listed here.

Section V. Attestations & Signature

I confirm that my insurance plan meets the federal requirements listed here.

I confirm that I will maintain insurance that meets the minimum requirements for myself and any J-2 dependents that accompany me throughout my entire J program.

By my signature below, I attest that I have read, understand, and agree to the insurance regulations as required by federal law.

Signature: _____   Date: _____