

ACADEMIC ADVISER'S RECOMMENDATION FORM FOR ACADEMIC TRAINING

This form provides information as required by the U.S. Department of State's Exchange Visitor Program to grant employment authorization under Academic Training to an international student on a J1 visa. As the student's academic adviser, ISSS asks that you please complete and sign this form. Please call 2-8057 if you have any questions about this process.

Student's Name: _____ ID#: _____

Student's Major: _____

Anticipated Date of Completion of Studies: _____

This date is the [] Master's/Ph.D. defense date [] Submission of thesis/dissertation date
[] Graduation date [] Other (Please explain)

DESCRIPTION OF THE TRAINING PROGRAM:

Location: _____ Job Title: _____

Salary: _____ per year Number of hours per week: _____

Dates of the training: From _____ to _____

Name of the training supervisor: _____

Address: _____

GOALS AND OBJECTIVES OF THE SPECIFIC TRAINING PROGRAM:

HOW DOES THE TRAINING RELATE TO THE STUDENT'S MAJOR FIELD OF STUDY?

WHY IS THE TRAINING AN INTEGRAL OR CRITICAL PART OF THE ACADEMIC PROGRAM OF THE STUDENT?

As the student's Academic Adviser or Dean I have set forth the nature and details of the academic training program. I approve of the amount of time requested as necessary to complete the goals and objectives of the training. With this letter, I recommend that you authorize this student to participate in the "Academic Training" program detailed here.

Name of the Academic Adviser

Signature Date _____

Email

Phone