



Rensselaer

J-2 DS-2019 Request Form **(To be used by spouse to travel on a J-2 Visa)**

1. I am requesting an DS-2019 for the following family member(s) to join me in the U.S.
 Spouse Children Spouse and Children

- I have sufficient funds to support my family members
\$6,500.00 Spouse \$2,700.00 Each Child

Personal Funds (Attach bank statements for the past three months)

Support from my Sponsor (Attach copy of support letter)

Other Source (Attach documentation)

- I have purchased health insurance for family members that meet the USIA requirements (Attach documents)

2. I am requesting an D201966 for the following family member(s) who are already in the U.S. to travel without me.

Spouse Children Spouse and Children

- I have purchased health insurance for family members that meet the USIA Requirements (Attach documents)

Name of J-1: _____ Date: _____

RIN (Rensselaer ID Number): _____

Phone: Home: _____ Office or Lab: _____ E-Mail: _____

Expiration Date of I-94: _____

Please fill out the back of this form with your dependent's information.

Spouse's Name:

Family Name (Last)	First Name	Relationship	
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Date of Birth	Place of Birth	City of Birth	Citizenship
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Children's Name(s):

1. _____

Family Name (Last)	First Name	Relationship	
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Date of Birth	Place of Birth	City of Birth	Citizenship
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2. _____

Family Name (Last)	First Name	Relationship	
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Date of Birth	Place of Birth	City of Birth	Citizenship
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3. _____

Family Name (Last)	First Name	Relationship	
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Date of Birth	Place of Birth	City of Birth	Citizenship
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4. _____

Family Name (Last)	First Name	Relationship	
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Date of Birth	Place of Birth	City of Birth	Citizenship
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