

INTERNATIONAL VISITOR APPLICATION

Please submit the following required documents to the McGlothlin Center for Global Education and Engagement:

Required Documents

Visitor

1. Copy of Visitor Passport
2. Copy of Any Current Visas
3. Financial Statement (if you have accompanying family, please make sure enough funds are available)
4. Proof of Health Insurance for Visitor (if not included as a benefit by Radford University)
5. DS-2019/IAP-66 forms (if previously employed in the U.S.)
6. I-94 records (if you are currently in the U.S. or have previously been employed in the U.S.)

Spouse and Dependents (If Accompanying Visitor)

1. Copy of Spouse and Dependents Passports
2. Copy of Any Current Visas
3. Proof of Health Insurance for Spouse and Dependents (if not included as a benefit by Radford University)

Important Notes

- Immigration authorities require all international visitors must have adequate health insurance coverage that meets Department of State requirements. Visitors will have to show proof of purchase of such a policy if not provided by Radford University as part of their employment benefits. If the visitor does not have adequate coverage, or if they prefer, The McGlothlin Center for Global Education and Engagement has options for purchasing short-term insurance. Please note that government regulations also require dependents to have health insurance coverage.
- If the funding source for the visitor is other than a Radford University salary or stipend, an official financial sponsorship letter must be provided by the visitor. All financial statements must be in English and US dollars. A financial statement must show the following amounts are available in the account:
 - Visitor: USD \$30,000
 - Spouse: USD \$10,000 (if coming to the U.S.)
 - Children/Dependent: USD \$5,000 per children (if coming to the U.S.)

For more information about this application, please contact the McGlothlin Center for Global Education and Engagement by calling (540) 831-6200 or emailing globaled@radford.edu.

When ready, please submit all paperwork to:

International Student & Scholar Advisor
McGlothlin Center for Global Education and Engagement
Cook Hall #105, Box 7002
Email: globaled@radford.edu

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INTERNATIONAL VISITOR APPLICATION

Step 1: Academic Department

Academic Department You Intend to Work: _____

Position Title You Intend to Work: _____

Step 2: Personal Information

Name: _____
Last/Family Name *First/Given Name* *Middle Name*

Gender: Male Female

City and Country of Birth: _____

Country of Citizenship: _____

Email: _____

Mobile Phone: _____ (include country code)

Home Country Address:

Academic Degrees & Field:

Title of Your Current Job: _____

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Step 3.2

U.S. Social Security Number (if any): _____

When Do You Plan to Enter the U.S.? _____ (Month/Day/Year)

At Which U.S. Embassy or Consulate Will You Be Applying for Your Visa? _____

Have You Ever Held a J-1 Visa in the Past? Yes *(Please submit copies of both sides of all previous DS-2019/IAP-66 forms and I-94 record)*
 No

Step 4: English Language Proficiency

International visitors are required to provide proof that their English language proficiency is sufficient enough to function on a day-to-day basis. Please indicate which of the following items you will provide as evidence of your English language proficiency (select at least one):

- A recognized English language test (such as TOEFL or IELTS) *(Please attach a copy of the score report)*
- An attestation/official document from an academic institution or English program certifying English Proficiency
- A documented interview conducted by the academic department (or the McGlothlin Center for Global Education and Engagement), either in-person, video or phone. (If you select this option, please contact your academic department to make arrangements for an interview)

Step 5: Family Information

Marital Status: Single Married

If Married, Will Your Spouse Accompany You? Spouse
 Children (Number of Children Coming: _____)

If Your Spouse or Children Will Accompany Your, Please Complete the Following Information: *(Please submit copies of their passport)*

Family Member #1

Relationship: _____ Gender: Male Female

Name: _____
Last/Family Name *First/Given Name* *Middle Name*

City and Country of Birth: _____

Country of Citizenship: _____

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Family Member #2

Relationship: _____ Gender: Male Female

Name: _____
Last/Family Name *First/Given Name* *Middle Name*

City and Country of Birth: _____

Country of Citizenship: _____

Family Member #3

Relationship: _____ Gender: Male Female

Name: _____
Last/Family Name *First/Given Name* *Middle Name*

City and Country of Birth: _____

Country of Citizenship: _____

Step 5: Important Information and Signature

Please note the following:

- Immigration authorities require all international visitors must have adequate health insurance coverage that meets Department of State requirements. Visitors will have to show proof of purchase of such a policy if not provided by Radford University as part of their employment benefits. If the visitor does not have adequate coverage, or if they prefer, The McGlothlin Center for Global Education and Engagement has options for purchasing short-term insurance. Please note that government regulations also require dependents to have health insurance coverage.
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- Visitors may be subjected by the [two \(2\) year home residency requirement](#) by the U.S. Department of State at the time their visa is granted. Visitors may be subject to this requirement if they are sponsored by a government or are pursuing knowledge in a field that appears on the [skills list](#). This list is a set of skills that foreign countries determine their nation to be in short supply, so they require their citizens obtaining these skills to return to their home country for two (2) years after their program concludes. In some cases, visitors can [petition to waive the Two \(2\) year requirement](#). Please contact the McGlothlin Center for Global Education and Engagement if you have any questions.

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I affirm and certify that all the information and answers to questions herein are complete, true and correct to the best of my knowledge and belief. I understand that any misrepresentation, falsification, or omission of any facts called for in the application may render this application void and will be cause for termination, whenever discovered.

Visitor's Signature: _____

Date: _____

When ready, please submit all paperwork to:

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