*[Insert USU Department Letterhead]*

[ADDRESSEE]
[ADDRESS LINE 1]
[ADDRESS LINE 2]
[CITY, STATE, AND ZIP CODE]

[DATE]

Dear [NAME],

I am happy to support your program extension at Utah State University (“USU”) as a       <<PROGRAM CATEGORY>> through the J-1 Visa Exchange Visitor Program for      <<NUMBER>> of months from to      <<PROGRAM END DATE>>.

Your continuing participation as a visiting scholar at USU is connected with the research project and objectives as set forth in the enclosed Scope of Research, where anticipated research objectives for this extension are described. You are still bound to the Research Participation Agreement as a condition of your program extension.

Representatives from USU’s Office of Global Engagement will work with you to provide the amended Form DS-2019 you need to extend your program. If the extension is approved, note you will be responsible for (a) providing the [required medical insurance coverage](https://globalengagement.usu.edu/visiting-scholars/j1-insurance-requirements) for you and your accompanying dependents (if any); and (b) providing the required minimum funding of $2,000.00 USD per month <<REFER TO INSTRUCTIONS IN COMMENT IF FUNDING IS FROM THE DEPARTMENT>> <<INCLUDE ANY ADDITIONAL CHARGES ASSESSED BY THE DEPARTMENT>>.

If you have any questions about USU’S expectations, the immigration processes, or the enclosures, please do not hesitate to contact us. To move to the next step, we require you to accept the terms set forth in this letter by certifying with your signature below. Please return a signed copy by email or mail to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ by      <<DATE>>.

Sincerely,

<<Signature>>

      <<NAME>>

      <<TITLE>>

Enclosures:

 Scope of Research

By signing below, I certify that I have read and understand this letter, and I accept the expectations as described herein.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SCOPE OF RESEARCH

<<THE SCOPE OF RESEARCH IS INTENDED TO OUTLINE THE ANTICIPATED RESEARCH OBJECTIVES OF THE VISITING SCHOLAR AND GENERALLY EXPLAIN THE REASON FOR THE PROGRAM EXTENSION. PROVIDE AS MANY DETAILS AS POSSIBLE.>>

|  |
| --- |
| Visiting Scholar Information |
| Name:       | Home Institution:       |
| Email:       | Title:       |
| Telephone:       | Home Address:       |

|  |
| --- |
| Host Faculty Member Information |
| Name:       | Department:       |
| Email:       | Title:       |
| Telephone:       | Mailing Address:       |

1. Duration:

Program Start Date-

Program End Date-

1. Brief Description of the Anticipated Research:

      <<DESCRIBE APPLICABLE TIMELINES, GOALS, PROJECT DETAILS, AS APPLICABLE>>

1. Anticipated Data to be Collected, Publication(s) to be drafted, Patent Application(s) or inventions to be generated, or other Intellectual Property to be created:

      <<ENUMERATE ANTICIPATED DELIVERABLES OR WORKPRODUCT. IF A PAPER IS ANTICIPATED TO BE DEVELOPED AS A RESULT OF COLLABORATION, INCLUDE THE GOAL AND DESCRIPTION. IF A DATA SET IS TO BE GENERATED OR EVALUATED, DESCRIBE IT.>>