

Global Engagement Office International Students & Scholars (ISS) Sarah Bonnel, J-1 Advisor

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J-1 Academic Training Request Form

Please complete this form and return it to our office along with an Internship Offer Letter signed by the company providing the internship opportunity (see Offer Letter Template).

PARTICIPANT INFORMATION		
SCU ID#:		
Phone Number:		
E-mail:		
	INTERNSHIP OPPORTU	NITY
Company Name		
Corporate Address (Street	et Address, City, State, Zip)	
Address where the inter	nship will be performed (if different the	an Corporate Address)
Supervisor's Name	Supervisor's Phone Number	Supervisor's E-mail Address
Number of Work Hours	per Week:	
Pay Amount:	per Hour / Week / Month / Stiper	ad (circle one)
Start Date (mm/dd/yyyy):	
End Date (mm/dd/yyyy)):	
Position Title:		

Brief description of the intern's	tasks, responsibilities, and goals:
Explanation of how the internshiparticipant in the development o	ip will support the academic goals of the J-1 program and help th f their skills:
	REQUIRED SIGNATURES
	valuable contribution to my J-1 program.
	n pant's standing and proposed internship, I approve this internship ated and integral to the participant's J-1 program goals.
Program Representative's Signar Print Name: Date:	ture: