

HOST DEPARTMENT APPROVAL AND AUTHORIZATION
(To Be Completed by Host Department and Uploaded to scholar's record in ISD)

Certification of English Language Proficiency
 (Complete this section before signing for Final Approval on reverse side)

Exchange Visitor's Name: _____

The Department of State requires scholars to have "sufficient proficiency in the English language, as determined by an objective measurement of English language proficiency, successfully to participate in his or her program and to function on a day-to-day basis." [22 CFR 62.11(a)(2)]

Check One:	Indicate how the Department has certified English proficiency for the prospective exchange visitor AND include appropriate supporting documentation	
<input type="checkbox"/>	Certification by a language test recognized by UCSB's graduate admissions	<p>➤ A copy of the test score is provided</p> <ul style="list-style-type: none"> • The test must have been taken within the past 5 years • IELTS overall band score of 7 or higher • TOEFL score must be 550 (paper based) or 80 (internet based iBT) http://www.graddiv.ucsb.edu/admissions/faq#scores
<input type="checkbox"/>	Certification by an academic institution or English language school	<p>➤ A copy of the letter is attached</p> <ul style="list-style-type: none"> • Verifies the exchange visitor possesses English language proficiency high enough to function daily within the UCSB position and within the local U.S. community. • Issued on letterhead in English within the past 6-months. • Includes signature from school official.
<input type="checkbox"/>	Certification by the Sponsoring Professor (signature required in right column)	<p>➤ Sponsoring Professor Name: _____</p> <p>➤ Date of Interview: _____</p> <p>➤ Duration of Interview: _____ <input type="checkbox"/> minutes <input type="checkbox"/> hour(s)</p> <p>➤ The Interview was Conducted:</p> <p style="padding-left: 20px;"> <input type="checkbox"/> In person <input type="checkbox"/> By Videoconference <input type="checkbox"/> By Phone </p> <p>➤ Interview Notes (required):</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>I declare under penalty of perjury that I have interviewed the prospective exchange visitor, and I have verified that the visitor's English language proficiency is sufficient to function daily within his/her UCSB position and within the local U.S. community.</p> <p>_____</p> <p style="display: flex; justify-content: space-between;"> Sponsoring Professor Signature Date </p>

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Please read the following statements carefully. By signing below, you agree as the Host Department, to sponsor the foreign national to participate in the University of California, Santa Barbara's J Exchange Visitor Program. You also attest to the following statements and agree to abide by such regulations as set forth for the J Exchange Visitor Program:

- I confirm that the purpose of the exchange visitor's program at UCSB meets the intent of the requested J-1 program category, and that the visitor will engage only in program activities that are consistent with such category.
- I have completed the "Certification of English Language Proficiency" section of this form and have provided appropriate supporting documentation, as required.
- The program activities will be conducted on the UCSB campus (Site of Activity), unless otherwise noted on the online request.
- The Host Department will notify OISS of any changes to the Exchange Visitor's J-1 program, including but not limited to, Program Activity, Non-Paid/Paid Appointment, Financial Support, Site of Activity, Early Completion or Termination of J-1 program.
- I understand that OISS is only responsible for assisting with the visitor's U.S. non-immigrant status and that the Host Department will be responsible for assisting with all other needs during the Exchange Visitor's stay in the U.S. including, but not limited to transportation, housing, computer/library access, workspace, equipment, faculty supervision, etc.

Sponsors of Exchange Visitors in the J-1 STUDENT INTERN Category MUST complete this section

I agree as the Host Faculty to submit the following additional required documents J-1 Student Interns:

- DS-7002 Form (T/IPP)
- Progress Evaluation Forms – as required during specific program periods

Host Faculty initials _____

A AUTHORIZING SIGNATURES

Exchange Visitor Last Name		Exchange Visitor First Name	
J-1 Program Start Date	J-1 End Start Date	Funding Source <input type="radio"/> UCSB <input type="radio"/> Other (Name) _____ <input type="radio"/> Personal	
UCSB Host Department			
Name of Department Chair/Institute Director		Email address	Telephone Number
Signature			Date:
Name of Host Faculty Member		Email Address	Telephone Number
Signature			Date

Host Department Contact Name (ISD Department User) _____

Email _____ **Phone** _____