

Academic Training Request

Academic training for J-1 students is allowed only if approved by the International Student Advisor. Your training must directly relate to your program of study in the United States.

Below are the requirements and responsibilities of Academic Training:

- The maximum amount of academic training a degree-seeking student may receive is 18 months. This includes training both before and after the degree is received.
- Ph.D. students who are participating in post-doctoral research (not teaching) may receive a total of 36 months of academic training.
- Students in non-degree programs may only receive training for the same length of time as their academic studies at Ferris State University.
- Students sponsored by their home government must obtain permission for academic training before it can be authorized.
- A letter showing a job offer must be submitted within 30 days of the end of your program
- Your DS-2019 must be kept current; request an extension of your document if it expires before the end date of your training.
- Once your request for training has been approved, you will receive a letter outlining your training. **YOU MAY NOT WORK UNTIL YOU HAVE THIS LETTER.**
- A change in your employer requires a new Academic Training application.
- Please be aware that any violations of this program can result in the termination of your program and return to your country.

Complete the top of the [Academic Training-Advisor Approval Form](#) and submit the form to your academic advisor.

Training can take place over a vacation, when the training is part of your academic program (e.g. internship or co-op), when a degree or coursework towards a degree is completed, or during a time specified in an exchange agreement under which the student is studying at Ferris State University.

I understand the requirements associated with academic training. I agree to follow the guidelines as listed above.

Today's date _____ FSU Student ID _____

Signature _____

Academic Training-Advisor Approval

Please fill out the information requested below and submit this form to your Academic Advisor for completion. Let the advisor know that he/she should return this form directly to the International Center, IRC 134.

Student Name: _____ Ferris ID# _____

SEVIS # N _____ E-mail _____

The above named student wished to engage in “Academic Training” for J-1 visa holders. In order to properly process his/her request, the following information is necessary. Please complete and return this form to the International Center, 1301 S. State, IRC 134, Big Rapids, Michigan, 49307, Phone 231-591-2824, Fax 231-591-2423.

1. **Description of the Program**

Location: _____ Job Title: _____

Name & Address of the training supervisor: _____

2. **Goals & Objectives of the Specific Training Program**

3. **How does the training relate to the student’s major field of study?**

4. **Why is the training an integral or critical part of the student/exchange visitor’s academic program?**

As the student’s Academic Advisor, I have set forth the nature and details of this academic training. I approve of the amount of time requested as necessary to complete the goals and objectives of the training. With this letter, I recommend that you authorize this student to participate in the “Academic Training” program that I have described.

Signature of Academic Advisor

Date

Name & title of Academic Advisor

Department