

REQUEST FOR ACADEMIC TRAINING

Mr./Ms. _____, a J-1 student who is earning or has earned a _____ in _____, wishes to engage in the "Academic Training" program discussed below.

TRAINING PROGRAM DETAILS (to be completed by the student)

Location (Name of Company/Organization and complete street address, including zip code):

Job Title: _____

Number of hours per week: _____ Dates of the training: From _____ To _____

Name, Telephone and/or Email of the Training Supervisor:

DESCRIPTION OF THE TRAINING PROGRAM (to be completed *with* your Academic Advisor)

1. Goals and objectives of the specific training program.

2. How does the training relate to the student's major field of study?

3. Why is the training an integral/critical part of the exchange visitor student's academic program? (If the student has completed his/her program, explain how this training is a direct application of the program of study).

DEPARTMENT AUTHORIZATION (to be completed by your Academic Advisor)

As the student's Academic Advisor I have set forth the nature and details of the "Academic Training" Program listed above. I approve of the amount of time requested as necessary to complete the goals and objectives of the training. With my signature below, I recommend that you authorize this individual to participate in the "Academic Training" program that I have described.

Name & Title of the Academic Advisor (please print or type)

Signature of the Academic Advisor

Date