

Date

Name of Exchange Visitor

Title

University Department/Name (Or Center)

City, Postal Code

COUNTRY

Dear _____:

I am pleased to extend your invitation to be a Visiting Research Scholar/Short Term Scholar/Professor in the Department/Center of/at _____ at/in the University of Florida. You will be compensated for your services with a salary of \$_____ per month/year. You will / will not receive fringe benefits during your employment period at the University of Florida. Benefits will include

_____.

Your activities during your visit will include

_____ which will require you to work closely with Dr. _____ on research related to _____. Additionally, we expect that you will be involved in many activities that will allow for cultural exchange among faculty, staff and students. Your J Program is valid for a period of _____ beginning _____ and will conclude on _____.

During your stay here, we will be able to provide you with office space, lab facilities, clerical support and computer and internet access. Our department/center will make arrangements for your transportation from the airport upon your arrival. We will also identify options for temporary housing and their estimated costs and forward this information to you in the coming weeks.

To satisfy immigration and program requirements, you must demonstrate that you have the required minimum of \$1500 per month of intended stay. You will also be required to purchase and maintain health and emergency evacuation insurance that meets the minimum standards set by the Department of State's Exchange Visitor Program. Additionally, you will be responsible for all fees and expenses related to your visa and stay here. If you intend to bring dependents, you will need to demonstrate you have the required health insurance for all family members and financial support for your spouse (\$1000/mo) and children (\$500/mo per child).

During your stay in the U.S. you are responsible for adhering to all university, immigration and exchange visitor program regulations and procedures. All J program participants bear a continuing responsibility throughout their program period to maintain their legal

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non-immigrant status. Therefore, during your stay in the United States you are responsible for adhering to all university, immigration and exchange visitor program regulations and procedures. This offer and your employment is contingent upon your eligibility to work under the provisions of all applicable immigration laws and regulations including the Immigration Reform and Control Act of 1986, as amended, and your providing the necessary documents to establish identity and employment eligibility to satisfactorily complete U.S. Citizenship and Immigration Services Form I-9. All employees bear a continuing responsibility throughout their employment to maintain their eligibility to work in the U.S. The University cannot pay a wage to any person not lawfully authorized to work regardless of the cause.

We look forward to your continued stay here at the University of Florida. We hope that your visit to the United States will fulfill the intent of the J Exchange Visitor Program—to promote mutual understanding between people of the United States and other countries by means of educational and cultural exchange.

Sincerely,

I understand and accept the conditions of this appointment as outlined above.

Exchange Visitor's Name

Date