

University of Alaska Fairbanks J-1 Student Intern Program Academic Advisor Form

The University of Alaska Fairbanks (UAF) is an official J-1 Exchange Visitor Program sponsor, designated by the United States Department of State. This form must be completed by the academic advisor (professor or administrator at the home institution) of a student who wishes to participate in a J-1 Student Internship Program at UAF.

Student's Name:

Surname/Family Name(s)

Given/First Name(s)

Academic Advisor (Professor or Administrator) Information

Surname/Family Name(s):

Given/First Name(s):

Title:

Name of Institution:

Address Information:

Street Address:

City:

State/Province:

Country:

Degree/academic level this student is **currently** enrolled in:

Student's Area of Studies:

This student is in good academic standing and is progressing normally toward the completion of their degree. Yes No

Student's **estimated** academic program completion date (month/day/year):

On completion of the J-1 Student Internship at UAF, this student plans to return and complete their degree requirements at this institution.

Yes No

I have read a description of this internship opportunity at UAF (provided on the internship placement plan, DS-7002) and agree that this experience will enhance this student's academic program at this institution.

Yes No

Additional Comments:

Please attach a separate sheet if necessary.

Advisor's Signature: _____

Date: mm/dd/yyyy

Thank you for completing this form and confirming the information regarding the student's academic program in relation to this J-1 student internship opportunity at UAF.

If the student intern served as a translator/interpreter for the advisor, please have the student sign below confirming that the advisor fully understood the content of this document and the internship opportunity at UAF before signing.

Student Intern's Signature: _____

Date: mm/dd/yyyy