

## Office of International Services

## J-1 Inter-Department Transfer

You must complete this form if you will be transferring between departments and/or schools within JHU. All fields and signatures are required. \*Incomplete requests will not be processed.

<b>SECTION 1: Must be Completed by the J-1 Exchange Vi</b>	<u>isitor (EV):</u>				
<b>Instructions for J-1 EV</b> : Complete and sign Section 1. Ask you. Ask the new department to complete Section 3 and uplo					ne form to
Last Name:	First Name:				
Current Department:	New Department:				
Expected End Date in Current Department:	Expected	Start Date in New Department:			
*By signing below, I confirm that I have given notice to my continue to work in my current department until my DS-201 reached. Failure to do so may affect my legal J-1 status.		•			
Signature of J-1 Exchange Visitor:			Date:		
<b>SECTION 2:</b> Must be Completed by the Current Depart	ment:				
<u>Instructions for the current department</u> : Complete and sign	gn Section 2 an	d return the form to J-1 EV	7.		
*By signing below, I confirm that the aforementioned J-1 EV department.	V has informed	the department of his/her	intent to transfer t	o a differe	ent
End Date of Appointment:					
Department:					
Signature & Name of Dept. Administrator:				Date:	
Signature & Name of Faculty Sponsor:  SECTION 3: Must be Completed by the New Department				Date:	
Department Administrator: Complete and sign Section 3 a request.  Faculty Sponsor: To transfer the EV to a new JHU department the transfer. The faculty sponsor in the NEW department muremain similar to the EV's research objective in the current dand new research and the relationship between both. Click H	ent, OIS needs ast provide in the	to confirm that the researche box below, an explanation of this transfer. Please pro	ch objective will ron of how the reservide a brief descr	emain con earch object iption of the	sistent during ctive will he original
*By signing below, I confirm that the aforementioned J-1 EV appointment only after the changes are made to the EV's SE original research objective during this transfer.  Start Date of Appointment:  Department:  Signaure & Name of Dept. Administrator:					
Signature & Name of Engulty Spansor:				Date.	