

J-1 Exchange Visitor Contact Information Form

J-1 Exchange Visitors (EVs) must complete this form and bring it to their registration/orientation appointments with FSIS. They must also bring: (1) passport, (2) Form DS-2019, (3) I-94 printed from <https://i94.cbp.dhs.gov>, (4) completed [Health Insurance Compliance Form](#) and insurance documentation, and (5) any J-2 dependents' passports, DS-2019s, I-94 records, and insurance documents.

J-1 EV: _____

UH college/school/unit: _____ Dept: _____

UH office/lab phone: _____ U.S. home phone: _____

Email address: _____

U.S. home address: _____
street address (include apt. #, if any) city state zip code

J-1 visa number: _____ U.S. arrival date: _____ Port of entry: _____
see visa in passport mm/dd/yyyy city

Family Members

Spouse's name: _____ Birth date: _____ Visa type: _____

Children (if more space is needed, continue on reverse side):

1. Name: _____ Birth date: _____ Visa type: _____

2. Name: _____ Birth date: _____ Visa type: _____

3. Name: _____ Birth date: _____ Visa type: _____

4. Name: _____ Birth date: _____ Visa type: _____

Emergency Contact Information (must be a person in your home country)

Name: _____ Relationship: _____

Street address: _____ City: _____

State/province: _____ Postal code: _____ Country: _____

Email: _____ Phone: _____