



J-1 OCCASIONAL LECTURES OR CONSULTATIONS REQUEST FORM

As a J-1 exchange visitor sponsored at San Diego State University (SDSU), you are only permitted to participate in activities (teach, conduct research, etc.) with SDSU. If during your program you are invited to be a guest lecturer or consult at a U.S. institution outside of SDSU, you may be able to do so as long as the following requirements are met for the proposed activity:

- Must not be a reoccurring event, in that it is a single event rather than an ongoing activity;
• Must be directly related to the objectives of your J-1 Exchange Visitor Program;
• Must be incidental to your primary program activities; and
• Must not delay the completion of your J-1 Exchange Visitor Program.

If your activity meets the above requirements, please complete this form and provide an invitation letter from the inviting institution. The letter should include the terms and conditions of your activity; duration and number of hours; site of activity; type and amount of compensation (if applicable); and a brief description of the activity.

Please submit the completed form and copy of the invitation letter via email to Christinejoy Sampankanpanich at csampan@sdsu.edu at least two (2) weeks prior to the proposed activity. If approved, Faculty Advancement will issue a letter confirming activity approval.

IMPORTANT: Failure to notify the Office of Faculty Advancement of any work-related activity at any other institutions within the U.S. during your J-1 program, may result in the termination of your J-1 program.

Section 1: J-1 Exchange Visitor's Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SEVIS ID: \_\_\_\_\_

Local U.S. Address \_\_\_\_\_
Street Apt/Unit City, State, Zip Code

Email Address: \_\_\_\_\_ US Phone #: \_\_\_\_\_

Section 2: Proposed Activity Information

Name of Inviting Institution: \_\_\_\_\_

Site of Activity: \_\_\_\_\_
Street Address City, State Zip Code

Dates of Activity: From: \_\_\_\_\_ To: \_\_\_\_\_ Number of Hours: \_\_\_\_\_

Description of Activity:

Will you be paid for this activity?                      Yes                      No

If yes, please confirm the type of compensation that you will be receiving:

- Reimbursement for receipted expenses
- Payment of an honorarium in the amount of \_\_\_\_\_
- Other: \_\_\_\_\_

**Section 3: J-1 Scholar Certification**

As a J-1 scholar, I confirm the following:

\_\_\_\_\_ The proposed activity is not a reoccurring event and is incidental to my primary program activities at SDSU.  
(initial here)

\_\_\_\_\_ The proposed activity is directly related to the original objectives of my J-1 Exchange Visitor Program at SDSU and will not delay the completion of my program.  
(initial here)

\_\_\_\_\_ I understand that I must notify Faculty Advancement of any changes to the above-mentioned activity.  
(initial here)

\_\_\_\_\_ I understand that I must not be hired as an employee by the inviting institution, but as an independent contractor, meaning that I will not have a sustained employment relationship with that institution.  
(initial here)

Signature

Date

**Section 4: SDSU Faculty Mentor/Supervisor Certification**

As the J-1 scholar’s faculty mentor/supervisor, I hereby confirm my permission to allow the above-mentioned scholar to pursue the aforementioned activity at the inviting institution and that this activity is related to the J-1 scholar’s work at SDSU, is incidental to the scholars primary program activity, will enhance the scholar’s program at SDSU, and will not delay the completion of the scholar’s J-1 program.

SDSU Faculty Mentor/Supervisor (print name)

Signature

Date