



Partner Agency: _____

Intrax ID Number:

Participant Eligibility Form

Proof of Student Status – To be completed by University Representative
If your Educational Institution will not sign this form, they must provide you with an official letter on university letterhead verifying this same information

I hereby certify that _____ / _____ is registered in our Institution as a full time student for the academic year 20__ / __.

Name of Institution: _____ City: _____

Official/Professor Name: _____ Title: _____

Official's Signature: _____

Day Month Year

Seal/Stamp

Please check this box if your Educational Institution has chosen to issue an official letter instead of signing this form.

University break dates – To be completed by Participant

I understand the purpose, rules and regulations governing the J-1 Exchange Visitor Program and have consulted the U.S. Department of State (DOS) website for information, reiterating what has been provided by my sponsor, at <http://j1visa.state.gov/>.

I hereby certify that I am enrolled as a full-time bona fide post-secondary school student and commit to only participating in the Summer Work & Travel Program during my main university break (school's official summer vacation). Furthermore, I certify that I will only take part in the program once I have successfully completed at least one semester or equivalent of my post-secondary academic studies. I understand that DOS Regulations prohibit me from working once my university break has ended and will therefore only accept a job offer for which program activities' dates do not conflict with my official university summer break. (CFR § 62.32, <http://j1visa.state.gov/sponsors/current/regulations-compliance/>)

Participant's Signature

Electronic Signature Validation – To be completed by Participant

I understand that by signing below, I agree that my electronic signature, as used during the Intrax Work/Travel application process, is the equivalent of my hand-written signature below

Participant's Signature

In Person Interview & English Language Assessment – To be completed by Partner Agency Representative

English Speaking/Comprehension: Low Intermediate Conversational Advanced

Test taken: _____ Test Score: _____

Name of Interviewer: _____ Interviewer's Title: _____

This applicant's Program Dates comply with the regulations. It is inappropriate for students to participate in this program outside the summer break provided in their host/home country's normal academic calendar. [22 CFR §62.32(a)]

Interviewer's Signature: _____
Day Month Year

Prospective exchange visitors must possess sufficient proficiency in the English language to participate in their programs. [22 CFR §62.10(a)(2)]