



Office of Admissions
University of Detroit Mercy
4001 W. McNichols Road
Detroit, MI 48221

Application Form for J1 Visiting Students and Scholars

This form is for international visiting students or scholars who require sponsorship from the International Services Office at University of Detroit Mercy. *Do not complete this form until you have proof of funding.

Section 1: Biographical Information

Type your name EXACTLY as it appears on your Passport (*please attach a copy of your passport*)

Last (Surname) _____ First Name _____ Middle Name _____
**Only if indicated on your passport as "Middle name"*

Date of Birth (mm/dd/yyyy): _____ Gender: _____

Birth City: _____ Birth Country: _____

Country of Citizenship: _____

Country of Legal Permanent Residence: _____

Section 2: Research Interest (This section applies to Research Scholars only)

Exchange Visitor Category:

Student _____ Professor _____ Research Scholar* _____

*Your research Interest (this section applies to Research Scholars only):

(Please attach a research plan with a detailed timeline if applicable)

*Indicate how your research interest helps the University of Detroit Mercy's academic program(s)

Section 3: Funding Sources

(Funding should meet or exceed program expense, which equals to minimum \$7,500 a semester, \$15,000 a year)

Program Sponsor (Detroit Mercy): _____

Personal funds: _____

Funds from other sources: _____

Name of Source: _____

Add all Funding together and enter here: _____

(Attach an official bank statement and/or a letter from the other source, i.e. sponsor/government on the government letterhead)

Section 5: Contact Information and Permanent Home Address

All visiting scholars are required to provide a permanent foreign home address. This is not necessarily the same address to which your acceptance offer will be mailed.

Permanent Home Address:

House/Apartment #	City	Province	Country	Postal Code
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Home Phone _____ Cell Phone _____

Email address _____

Mailing Address (If different from your permanent home address):

Signature _____ **Date:** _____

This form must be completed and returned to Ms. Weihong Sun, Director of International Admissions by email at sunwe@udmercy.edu.