



U.S. Department of State

CERTIFICATE OF ELIGIBILITY FOR EXCHANGE VISITOR STATUS (J-NONIMMIGRANT)

1. Surname/Primary Name: Xu		Given Name: Xinhang		Gender: MALE		N0035116451			
Date of Birth (mm-dd-yyyy): 06-11-1993		City of Birth: Anhui		Country of Birth: CHINA		Citizenship Country Code: CH		Citizenship Country: CHINA	
Legal Permanent Residence Country Code: CH		Legal Permanent Residence Country: CHINA		Position Code: 214		Position: UNIVERSITY GRADUATE STUDENTS		J-1	
Primary Site of Activity: Electrical and Computer Engineering 1 SHIELDS AVE DAVIS, CA 95616-5270									
2. Program Sponsor: University of California, Davis									
Participating Program Official Description: PROFESSOR; RESEARCH SCHOLAR; SHORT-TERM SCHOLAR; SPECIALIST; STUDENT ASSOCIATE; STUDENT BACHELORS; STUDENT DOCTORATE; STUDENT INTERN; STUDENT MASTERS; STUDENT NON-DEGREE						Program Number: P-1-02538			
Purpose of this form: Amend previous form: program date(s) amended									
3. Form Covers Period: From (mm-dd-yyyy): 03-10-2024 To (mm-dd-yyyy): 03-09-2026				4. Exchange Visitor Category: RESEARCH SCHOLAR Subject/Field Code: 14.4701 Subject/Field Code Remarks: Electrical and Computer Engineering					
5. During the period covered by this form, the total estimated financial support (in U.S. \$) is to be provided to the exchange visitor by: Current Program Sponsor funds : \$128,960.00 Total : \$128,960.00									

6. RESPONSIBLE OFFICER OR ALTERNATE RESPONSIBLE OFFICER ATTESTATION: I attest that prior to issuing this Form DS-2019, the Program Sponsor organization identified above, for which I serve as the Responsible Officer or Alternate Responsible Officer, has verified, in accordance with the requirements of 22 CFR 62.12(b), that each prospective exchange visitor: (i) is eligible and qualified for, and accepted into, the program in which he or she will participate; (ii) possesses adequate financial resources to participate in and complete his or her exchange visitor program; and (iii) possesses adequate financial resources to support an accompanying spouse and dependents, if any. I also attest that upon printing and signing this form, I am physically present in the United States or in a U.S. territory. A notification copy of this form has been provided to the U.S. Department of State.	7. Mary Alurwar		Alternate Responsible Officer	
	Name of Official Preparing Form S.I.S.S.		Title	
	International Center, 1 Shields Ave. DAVIS, CA 95616		530-752-8997	
	Address of Responsible Officer or Alternate Responsible Officer Mary L Alurwar Date: 2023.12.21 11:32:04 -08'00'		Telephone Number 12-21-2023	
Signature of Responsible Officer or Alternate Responsible Officer		Date (mm-dd-yyyy)		

8. Statement of Responsible Officer for Releasing Sponsor (FOR TRANSFER OF PROGRAM)
Effective date (mm-dd-yyyy): . Transfer of this exchange visitor from program number sponsored by
to the program specified in item 2 is necessary or highly desirable and is in conformity with the objectives of the Mutual Educational and Cultural Exchange Act of 1961, as amended.

Signature of Responsible Officer or Alternate Responsible Officer

Date (mm-dd-yyyy) of Signature

PRELIMINARY ENDORSEMENT OF CONSULAR OR IMMIGRATION OFFICER REGARDING SECTION 212(e) OF THE IMMIGRATION AND NATIONALITY ACT AND PL 94-484, AS AMENDED (see item 1(a) of page 2).

The Exchange Visitor in the above program:

1. ☐ Not subject to the two-year residence requirement.
2. ☒ Subject to two-year residence requirement based on:
- A. ☐ Government financing and/or
- B. ☒ The Exchange Visitor Skills List and/or
- C. ☐ PL 94-484 as amended

(ALL USAID PARTICIPANTS G-2-00263 AND ALL ALIEN PHYSICIANS SPONSORED BY P-3-04510 ARE SUBJECT TO THE TWO-YEAR HOME RESIDENCE REQUIREMENT)

Joseph R. Mathias
Consular Officer
U.S. Department of State

Name
Joseph R. Mathias
Signature of Consular or Immigration Officer

Title
12-21-2023
Date (mm-dd-yyyy)

THE U. S. DEPARTMENT OF STATE RESERVES THE RIGHT TO MAKE FINAL DETERMINATION REGARDING 212 (e).

EXCHANGE VISITOR CERTIFICATION: I have read and agree with the statement in item 2 on page 2 of this document.

Xinhang Xu
Signature of Applicant

96 Jinchai Ave. Hefei city, Anhui province
Place

12-22-2023
Date (mm-dd-yyyy)