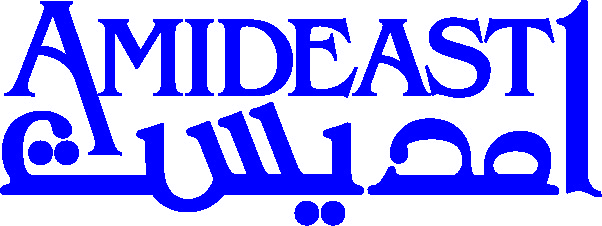
**TRAINEE/INTERN APPLICATION COVER SHEET**

1. Read the following information sheet and complete the application. Present it to AMIDEAST, along with 1) a copy of your passport; and 2) a copy of your internship/trainee offer letter.
2. Your information will be vetted through the OFAC data base, and your application evaluated to determine if you are eligible for an intern/trainee visa.
3. Once you have been cleared, you will be invoiced for the AMIDEAST sponsorship fee. For programs under six months, the fee is $1,000. For programs six months or longer, the fee is $1,200. The fee covers the J sponsorship and monitoring of your intern/trainee program and can be paid by you or by the prospective host institution. It does NOT include the following:

* Transportation costs to your internship/training institution
* U.S. Visa fee ($160)
* SEVIS fee ($180)
* Housing or living expenses
* Health insurance

There will be an additional fee to cover the cost of a site visit if the host company has fewer than 25 employees or less than $3 million in annual revenue.

1. AMIDEAST will contact your prospective host institution to ensure that they meet the U.S. government requirements for hosting interns/trainees. Should the provider not meet the requirements, you will be refunded your fee minus 10% of the total.
2. If the hosting institution is approved, you will be sent a Training/Internship Placement Plan (DS-7002), which will outline the responsibilities of the host institution, AMIDEAST and you. This must be signed by you and a copy must be returned to AMIDEAST. This can be done electronically by e-mail or fax. You will then be issued a DS -2019 to obtain a visa. If for any reason you are denied a visa, you will be refunded your fee minus 15% of the total.
3. Over the course of your internship, an AMIDEAST advisor will check in with you to ensure that you are getting the training that you were promised, as well as to monitor your safety and well-being. We will also assist you with any issues that you may have directly related to your training in the U.S.

**J-1 Visa Intern and Trainee**

**Information Sheet**

**Interns** are people who are either enrolled in and pursing academic studies outside of the United States or who have graduated from a foreign university no more than 12 months before the exchange visitor program start date. Those graduates with degrees from U.S. Institutions are not eligible for the internship category. The MAXIMUM Intern program duration is 12 months.

<http://j1visa.state.gov/programs/intern/>

**Trainees** are people who have a degree from a foreign university and at least one year of related work experience gained from a foreign employer OR people who have at least 5 years related work experience gained from a foreign employer. The MAXIMUM Trainee program duration is 18 months.

<http://j1visa.state.gov/programs/trainee/>

**Eligibility:** To be eligible for Sponsorship on the J-1 Trainee/ Intern Visa, applicants must:

* Have secured a training or internship with a company in the USA
  + Documented by an internship offer letter
  + In one of the following fields:

Information Media Communications

Management Business Commerce

Finance Science Engineering

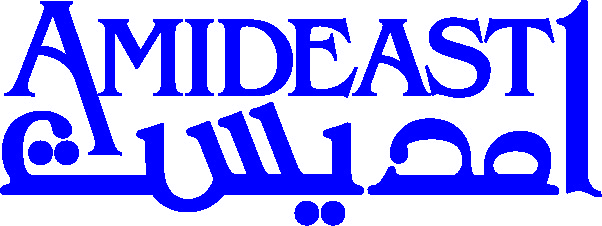
Architecture Mathematics Industrial Occupations

Public Administration Law Education

* Be proficient in English as demonstrated by a minimum 61 on the TOEFL iBT (500 on the paper-based TOEFL or ITP), or equivalent score in another test such as the TOEIC. If intern/trainee has successfully attended an American-style school which was taught in English, transcripts or a letter from the dean can be substituted for test scores.
* Meet one of these education/experience descriptions:
  + Be currently enrolled in and pursuing studies at a foreign degree- or certificate-granting post-secondary academic institution outside the United States; or
  + Have graduated from such an institution no more than 12 months prior to their exchange visitor program start date; or
  + Have a degree or professional certificate from a foreign post-secondary academic institution and at least one year of prior related work experience in his or her occupational field outside the United States; or
  + Have five years of work experience outside the United States in the occupational field in which they are seeking training.

**Requirements:** Interns/Trainees are required to:

* Leave the U.S. within 30 days after completion of the program. (Applicants may not work during this 30 day period, or extend their program. They may travel during this time.)
* Show proof of purchased health insurance that meets J-visa requirements for the duration of the program.
* Comply with any home residency requirement set by the U.S. Consular Office. Residency requirements mean that the participant must live in his/her home country for a set period of time before being eligible for a permanent (work, spouse, etc.) U.S. visa. Details can be obtained from the consular officer at the U.S. Embassy.



**INTERN/TRAINEE VISA SPONSORSHIP**

**APPLICATION FORM**

*Please complete this form in detail to determine your eligibility to obtain sponsorship for an intern or trainee J-1 visa to the United States.*

**PERSONAL INFORMATION**

Name (exactly as on passport): \_Izhak\_\_Zahi\_\_\_\_\_Siman-Tov\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(First) (Middle) (Last)

Place of Birth: Tel-Aviv\_\_\_\_\_\_Israel \_\_\_\_ Date of Birth: \_\_\_\_\_\_\_06\_\_\_\_\_\_21\_\_\_\_\_1982\_

(City) (Country) (Month) (Day) (Year)

Citizenship Country: \_Israel \_\_ Country of Permanent Residence: \_\_\_\_\_israel\_\_\_\_\_\_\_

Passport Number: \_\_21749783 Gender: \_\_male\_\_\_\_

**I am applying for (check one):**

**­­**\_\_\_\_\_ Internship Program \_\_\_\_\_\_ Training Program

Program Start Date *(month/day/year)*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Program End Date *(month/day/year)*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**U.S. INFORMATION** (Circle Yes or No for each question.)

Are you a U.S. Citizen? Yes No

Are you a holder of a U.S. Permanent Resident card (green card)? Yes No

Have you applied for U.S. immigration/citizenship lottery? Yes No

Have you been to/in the U.S. before? Yes No

If yes please provide the following information:

|  |  |  |
| --- | --- | --- |
| **Dates** | **Purpose of Visit** | **Type of U.S. Visa** |
| 06/2013 | Diplomatic mission for Government of Israel | A2 |

**HOME ADDRESS AND CONTACT INFORMATION**

Home Address: 17 Avigdor Hame’iri \_\_(apt#1)\_\_\_\_\_\_\_\_\_\_Tel-Aviv\_\_\_\_\_\_\_\_Israel \_\_\_\_\_\_Israel

(Street Address) (City) (State/Province) (Country)

Telephone Number: \_\_\_+972-544400677\_\_\_\_\_\_\_\_\_ Mobile Number: +1-917-200-8414

Email Address: \_\_Zahi\_simantov@yahoo.com\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mailing address (if different from above)**

*Please list the address where you would like to receive your DS-2019 form. It will be sent via DHL or another international courier.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Street Address) (City) (State/Province) (Country)

**EMERGENCY CONTACT INFORMATION**

Full Name: \_\_\_\_\_\_Tamar Siman-Tov \_\_\_\_\_\_\_\_\_\_ Relationship to you: \_\_\_\_sister \_\_\_\_\_\_

Address: 17 Avigdor Hame’iri \_\_(apt#1)\_\_\_\_\_\_\_\_\_\_Tel-Aviv\_\_\_\_\_\_\_\_Israel \_\_\_\_

Phone: +972-544400677\_\_ Email Address: Tammy@xtholdings.com

**ACADEMIC INFORMATION:** Please List All Post-Secondary Education.

|  |  |  |
| --- | --- | --- |
| **Name of School or University** | **Date Degree Awarded or Expected (month/day/year)** | **Degree Achieved, Major** |
| Interdisciplinary Center Herzliya | May 2009 | Bachelors of Art in Government, Diplomacy and Strategy |
| Columbia University | Expected May 2019 | Masters of Science, Negotiation and Conflict Resolution |
|  |  |  |

**English Language**: Please list any English language proficiency tests you have taken.

|  |  |  |
| --- | --- | --- |
| **Tests Taken** | **Test Date** | **Scores** |
| TOEIC |  |  |
| ITP |  |  |
| TOEFL (indicate whether paper-based test or iBT) |  |  |
| Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |

**EMPLOYMENT INFORMATION**

Occupational Field: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years of Work Experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Current Employment:**

Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Briefly Describe Current Job Responsibilities: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Previous Employment:**

|  |  |  |
| --- | --- | --- |
| **Employer** | **Job Title** | **Dates of Employment** |
|  |  |  |
|  |  |  |
|  |  |  |

**INTERNSHIP/TRAINING SITE INFORMATION**

*Please complete the section below with information regarding your proposed training/internship site.*

Name of Company/Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Address of Company/Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­\_\_\_\_\_\_

Telephone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Briefly Describe Your Proposed Training/Internship Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By signing this form, I hereby certify that all information contained in this document is true and accurate.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_