

# J-1 SCHOLAR PERMANENT RECORD

University of Southern California  
Office of International Services

## Biographical Information

( ) Prof. ( ) Dr. ( ) Mr. ( ) Ms. \_\_\_\_\_ Sex: \_\_\_\_\_  
*FAMILY (LAST) NAME* *Given (First) Name* *Other*

City and Country of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Local (U.S.) Address: \_\_\_\_\_  
*No. and Street* *Room #* *City* *Zip Code*

Local Telephone: ( ) \_\_\_\_\_ **USC Dept:** \_\_\_\_\_

Email Address: \_\_\_\_\_ International Phone: \_\_\_\_\_  
*Country Code* *City Code* *Phone*

Home Country Address: \_\_\_\_\_

Occupation in Home Country: \_\_\_\_\_ Academic Institution or other place of employment in Home Country: \_\_\_\_\_

Person to notify in Case of emergency: \_\_\_\_\_  
*Name* *Address*  
\_\_\_\_\_  
*Phone* *E-mail Address*

Marital Status: Single/ Married Did your spouse and/or dependents accompany you to the United States?: Yes/ No

## Health and Accident Insurance Information

Name of Company: \_\_\_\_\_ Phone#: \_\_\_\_\_ Policy#: \_\_\_\_\_

The following questions are **optional**. We appreciate your response as we would like to get a better idea of the interesting work being done by international scholars at USC.

**Please tell us a little bit about the research or teaching you will be conducting while at USC.**

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**What are some of the applications of your research?**

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**Please attach photocopies of the ID and photo page of your passport, DS-2019, US Visa, and I-94 card (front & back)**

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

**Check-in Information: (for office use only)**

Check in: \_\_\_ / \_\_\_ / \_\_\_ Initials: \_\_\_\_\_ Given insurance information? Yes  No

SSN letter  USCard letter  Dept. contacted re: iVIP

Amend Program to: \_\_\_ / \_\_\_ / \_\_\_  Validated Initials: \_\_\_\_\_

**FORM OIS.52**

Revised 7/15/2009