

International Students & Scholars Office 328 O' Dowd Hall // Rochester, MI 48309-4428 Phone: 248.370.3358 // Fax: 248.370.3351 Web: http://www.oakland.edu/iss

## J-1 Student Academic Training (AT) Request Form

The file is available at http://www.oakland.edu/iss under ISSO Forms.

J-1 Student Information					
LAST Name:	First Name:				
OU ID#	Phone #:		OU Email:		
Degree Level (Check): Bachelor's		Master's	Doctoral	Non-Degree or Exchange Student	
<b>Employment Information</b>	(AT = Academ	nic Training)			
Site of Academic Training Name:			At Job Tasks	3:	
Site of Academic Training A	Address:				
Supervisor Name:	Phone #:		Email:	Wage/Salary:	
AT Start Date:	AT End Date:			Hours Per Week #:	
Student Signature:			Date:		
To be completed by Acade:  Main goals/objectives of Ac  Why is this training an impo	ademic Training		m of study at ho	ome institution?	
Student's Academic Major/F	eld:		Name of Home University:		
Print Advisor's Name:		Title:	Email:		
Advisor Signature:			Date:	Phone Ext:	
For ISSO use only - DO N	OT WRITE BE	LOW THIS LI	NE		
I have reviewed this letter To ensure the quality of the appropriateness of the Aca	e Academic Trainin	g program, I have d	letermined as satisfa	actory the effectiveness and	
Signature:		Name:		Date:	
Responsible Officer, Oak	land University	, EV Program l	P-1-00655		