

## Completing the DS-7002 - Training/Internship Placement Plan



### TRAINING/INTERNSHIP PLACEMENT PLAN

ESTIMATED BURDEN: 2 hours

| SECTION 1: ADDITIONAL EXCHANGE VISITOR INFORMATION                                                                                             |  |                                                                                                                                                                                                                 |                        |                                                                                                                                                                                                                                  |       |
|------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|
| Trainee/Intern Name (Surname/Primary, Given Name(s) (must match passport name))                                                                |  |                                                                                                                                                                                                                 |                        | E-mail Address                                                                                                                                                                                                                   |       |
| LAST NAME                                                                                                                                      |  | FIRST NAME                                                                                                                                                                                                      |                        | STUDENT'S EMAIL ADDRESS                                                                                                                                                                                                          |       |
| Program Sponsor                                                                                                                                |  |                                                                                                                                                                                                                 | Program Category       |                                                                                                                                                                                                                                  |       |
| Rutgers, The State University of New Jersey                                                                                                    |  |                                                                                                                                                                                                                 | Student Intern         |                                                                                                                                                                                                                                  |       |
| Occupational Category                                                                                                                          |  | Current Field of Study/Profession                                                                                                                                                                               |                        | Experience in Field (number of years)                                                                                                                                                                                            |       |
| N/A                                                                                                                                            |  | ex. Computer Science                                                                                                                                                                                            |                        | N/A                                                                                                                                                                                                                              |       |
| Type of Degree or Certificate                                                                                                                  |  | Date Awarded (mm-dd-yyyy) or Expected                                                                                                                                                                           |                        | Training/Internship Dates (mm-dd-yyyy)                                                                                                                                                                                           |       |
| ex. Undergraduate- Bachelors                                                                                                                   |  | MM-DD-YYYY                                                                                                                                                                                                      |                        | From MM-DD-YYYY To MM-DD-YYYY                                                                                                                                                                                                    |       |
| SECTION 2: HOST ORGANIZATION INFORMATION                                                                                                       |  |                                                                                                                                                                                                                 |                        |                                                                                                                                                                                                                                  |       |
| Organization Name                                                                                                                              |  |                                                                                                                                                                                                                 | Phase Site Address     |                                                                                                                                                                                                                                  | Suite |
| Rutgers Department of (ex. Computer Science)                                                                                                   |  |                                                                                                                                                                                                                 | 110 Frelinghuysen Road |                                                                                                                                                                                                                                  |       |
| City                                                                                                                                           |  | State                                                                                                                                                                                                           | ZIP Code               | Website URL                                                                                                                                                                                                                      |       |
| Piscataway                                                                                                                                     |  | NJ                                                                                                                                                                                                              | 08854                  | Rutgers Department website                                                                                                                                                                                                       |       |
| Employer ID Number (EIN)                                                                                                                       |  | Exchange Visitor Hours Per Week                                                                                                                                                                                 |                        | Compensation                                                                                                                                                                                                                     |       |
| 1-226001086-A1                                                                                                                                 |  | 32                                                                                                                                                                                                              |                        | Stipend <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, how much? _____ per _____<br>Non-Monetary <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, value? _____ per _____ |       |
| Workers' Compensation Policy                                                                                                                   |  |                                                                                                                                                                                                                 |                        | Does your Workers' Compensation policy cover exchange Visitors?                                                                                                                                                                  |       |
| <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, Name of Carrier _____ Self-Insured, PMA Management Corp. for claim |  |                                                                                                                                                                                                                 |                        | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, exempt<br><input type="checkbox"/> No, but equivalent coverage                                                                                              |       |
| Number of FT Employees Onsite at Location                                                                                                      |  | Annual Revenue                                                                                                                                                                                                  |                        |                                                                                                                                                                                                                                  |       |
| 10,100                                                                                                                                         |  | <input type="checkbox"/> \$0 to \$3 Million <input type="checkbox"/> \$3 Million to \$10 Million <input type="checkbox"/> \$10 Million to \$25 Million <input checked="" type="checkbox"/> \$25 Million or More |                        |                                                                                                                                                                                                                                  |       |

#### TIPS FOR PAGE 1:

##### SECTION I:

- **NAME-** Please use the full name of the intern exactly as written on his/her passport. All capitals.
- **TYPE OF DEGREE-** Ex. Bachelors; Masters; Ph.D. etc.
- **DATE AWARDED-** Student's expected graduation date. Must be in the future and after the end date of the student's internship.

##### SECTION II:

- **ORGANIZATION NAME-** should be "Rutgers," followed by the department where the intern will train.
- **SITE ADDRESS-** Should be where the student intern will be working.
- **The Employee Identification Number (EIN)** 1-226001086-A1.

| SECTION 2: HOST ORGANIZATION INFORMATION                                                                                    |                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                               |                                           |                                                                                                                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Organization Name<br>Rutgers Department of (ex. Computer Science)                                                           |                                                                                                                                                                                                                                   | Phase Site Address<br>110 Frelinghuysen Road                                                                                                                                                                                                                  |                                           | Suite                                                                                                                                                                                               |
| City<br>Piscataway                                                                                                          | State<br>NJ                                                                                                                                                                                                                       | ZIP Code<br>08854                                                                                                                                                                                                                                             | Website URL<br>Rutgers Department website |                                                                                                                                                                                                     |
| Employer ID Number (EIN)<br>1-226001086-A1                                                                                  | Exchange Visitor Hours Per Week<br>32                                                                                                                                                                                             | Compensation<br>Stipend <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, how much? _____ per _____<br>Non-Monetary Compensation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, value? _____ per _____ |                                           |                                                                                                                                                                                                     |
| Workers' Compensation Policy<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, Name of Carrier |                                                                                                                                                                                                                                   | Self-Insured, PMA Management Corp. for claim                                                                                                                                                                                                                  |                                           | Does your Workers' Compensation policy cover exchange Visitors? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No, exempt<br><input type="checkbox"/> No, but equivalent coverage |
| Number of FT Employees Onsite at Location<br>10,100                                                                         | Annual Revenue<br><input type="checkbox"/> \$0 to \$3 Million <input type="checkbox"/> \$3 Million to \$10 Million <input type="checkbox"/> \$10 Million to \$25 Million <input checked="" type="checkbox"/> \$25 Million or More |                                                                                                                                                                                                                                                               |                                           |                                                                                                                                                                                                     |

|                                      |                              |
|--------------------------------------|------------------------------|
| Printed Name of Trainee/Intern _____ | Date (mm-dd-yyyy) MM-DD-YYYY |
| Signature of Trainee/Intern _____    |                              |

## CONTINUED TIPS ON PG 1:

### SECTION II:

- **HOURS**- minimum hours per week should be 32 hours
- **COMPENSATION**- Check "YES" if you will pay the Student; check "NO" if you will not pay. If "YES", provide the monthly/hourly rates the Student will receive. Non-monetary compensation such as housing, meals, transportation.
- **WORKER COMPENSATION**- Answer "YES", to the question, Will WC Policy cover the intern/trainee?
- **NUMBER OF EMPLOYEES**- 10,100
- **ANNUAL REVENUE**- \$25 million or more
- **SIGNATURE**- Scanned copies and electronic signatures are acceptable.

## SECTION 4: TRAINING/INTERNSHIP PLACEMENT PLAN

Each Training/Internship Placement Plan should cover a definite period of time and should consist of definite phases of training or tasks performed with a specific objective for each phase. The plan must also contain information on how the trainees/interns will accomplish those objectives (e.g. classes, individual instruction, shadowing). Each phase must build upon the previous phase to show a progression in the training/internship. A separate copy of pages 3 and 4 must be completed for each phase if applicable (e.g.; if the trainee/intern is rotating through different departments).

|                                                           |            |                                |     |
|-----------------------------------------------------------|------------|--------------------------------|-----|
| Surname/Primary, Given Name(s) (must match passport name) |            | The Exchange Visitor is:       |     |
| LAST NAME                                                 | FIRST NAME | Student Intern                 |     |
| Program Sponsor                                           |            | Program Number                 |     |
| Rutgers University- Dept. of Computer Science             |            | P-1-00737                      |     |
| Main Program Supervisor/POC at Host Organization          |            | Supervisor Contact Information |     |
| Sponsoring Supervisor's Full Name                         |            | Phone                          | Fax |
| Title                                                     |            | Email                          |     |
| ex. Assistant Professor                                   |            | Sponsoring Supervisor's Email  |     |

### PHASE INFORMATION

|                                               |  |                                  |                                      |                        |  |
|-----------------------------------------------|--|----------------------------------|--------------------------------------|------------------------|--|
| Phase Site Name                               |  | Training/Internship Field        |                                      | Phase Site Address     |  |
| Rutgers University- Dept. of Computer Science |  | ex. Computer Science             |                                      | 110 Frelinghuysen Road |  |
| Phase Name                                    |  | Start Date (mm-dd-yyyy) of Phase | End Date (mm-dd-yyyy) of Phase       | Phase                  |  |
| ex. Research Project on...                    |  |                                  |                                      | 1 of 1                 |  |
| Primary Phase Supervisor                      |  |                                  | Supervisor Title                     |                        |  |
| Sponsoring Supervisor's Full Name             |  |                                  | ex. Assistant Professor              |                        |  |
| E-mail                                        |  |                                  | Phone Number                         |                        |  |
| Sponsoring Supervisor's Email                 |  |                                  | Sponsoring Supervisor's Phone number |                        |  |

**Internship Placement Phases:** Short-term internships (less than four months), will require one training phase. Longer internships will require more than one phase and should demonstrate an expansion of knowledge and skills. Internships lasting between five and eight months should have at least two internship phases. Internships between nine and twelve months should have at least three phases. These are guidelines and exceptions may be considered depending upon the nature of the internship.

No phase should be longer than six months. Phases should, (1) build upon previous phases where more developed skills and information is introduced to the intern or, (2) consist of departmental rotations. All phases should have different tasks, goals, and skills to be imparted.

## CONTINUED TIPS ON PG 3:

### SECTION IV:

- **NAME-** Use the full name as written on his/her passport. All capitals. (LIKE PG 1)
- **PROGRAM SPONSOR-** "Rutgers," followed by the department where the intern will train.
- **PHASE INFORMATION- Phase Site Name:** List name of specific lab or academic department at Rutgers University  
**Training/Internship Field:** Specific field such as engineering, computer science, etc.  
**Phase Name:** describes the internship (ex. Orientation, HR Rotation, or Research Project)  
**Phase Dates:** Internship will have multiple phases (1 of 2), such as observation phase, lab work phase, etc. In this case, you will need to complete a separate page 3 for the DS-7002 to each individual phase.

**Description of Trainee/Intern's role for this program or phase**

Short and to the point. It should be a summary of the phase – what will the intern do during this phase? (e.g. Introduction to Department, orientation to work environment, Rotation with accounting personnel, Shadowing of department staff,...)

**Specific goals and objectives for this program or phase**

What needs to occur in order for this phase to be successful? What must happen before the intern can move on to the next phase, if any?

List what you hope to impart upon the Intern and what you expect him or her to contribute. A good phrase to use here is, "By the end of this phase, the intern will be able to..."

**Please list the names and titles of those who will provide continuous (for example, daily) supervision of the Trainee/Intern, including the primary supervisor. What are these persons' qualifications to teach the planned learning?**

List names and titles: Provide details the frequency with which the sponsoring supervisor and the Student Intern will meet; a general agenda for their meetings; and what information the faculty sponsor will review to assess the status of the Student Intern's projects.

Include the name of the faculty sponsor; his/her official title at the department; and a few sentences about his/her qualifications to provide supervision. Example: The Student Intern will be supervised by Professor X, a Principal Faculty Member at Y. Professor X has been a Principal Faculty Member for 5 years, and he currently supervises.

**CONTINUED TIPS  
ON PG 3:**

**SECTION IV:**

- **DESCRIPTION-** 1-2 sentences specifying how the internship will be geared towards the completion of the Student's academic program at his or her home institution.
- **GOALS AND OBJECTIVES-** This section should focus on describing precisely what the Student Intern hopes to accomplish. The specific goals and objectives need to demonstrate what will be learned by the Student Intern.  
Example: The objective of this internship is to provide the Student with research experience that will be used to complete the requirements for his degree at Jilin University.

**What plans are in place for the Trainee/Intern to participate in cultural activities while in the United States?**

Rutgers University, and International Student and Scholar Services, regularly offers various cultural and social activities to which the student intern can participate in. These activities will provide them an opportunity to learn more, and be exposed to American culture. In addition, the student intern will interact and collaborate with the students from other countries, as well as domestic students.

**What specific knowledge, skills, or techniques will be learned?**

Explain the kinds of knowledge, skills, and techniques you expect the intern to gain during his/her time with your department. What resources does the host possess that can be taught to the intern during this phase? Bullet points are acceptable.

Example: The Student Intern will become familiar with FACS analysis, mammalian cell culture techniques, Cas9-mediated mutations, transgenic animal generation and western blots.

**How specifically will these knowledge, skills, or techniques be taught? Include specific tasks and activities (Interns) and/ or methodology of training and chronology/syllabus (Trainees).**

Example 1: The Student Intern will be closely mentored by a postdoctoral fellow in Professor X's laboratory. The fellow will be in charge of directly working with the Student Intern and will demonstrate the specific lab techniques; the Student Intern will then be expected to become independent and proficient such that he can complete these lab techniques himself.

J-1 interns should not be utilized in unskilled labor positions. Interns must be actively learning new skills. No more than 20% of their time should be considered clerical duties. Bullet points are acceptable.

**CONTINUED TIPS  
ON PG 4:**

**SECTION IV:**

- **CULTURAL ACTIVITIES-** In addition to what our office provides, please describe programs/activities that will be available to the student intern that will expose him or her to American culture.
- **KNOWLEDGE AND SKILLS-** The response to this question should expand on the objectives. It should provide substantial details regarding what the Student is going to learn by the end of the internship.
- **METHODOLOGY-** This is how the intern will learn what you wish to train. What the intern will do on a daily basis. List tangible training activities that will be taken on by the intern (i.e. what the host will do for the intern).

Additional Phase Remarks (optional)

DS-7002  
02-2018

Page 4 of 5

10. I certify that this training or internship meets all the requirements of the Fair Labor Standards Act, as amended (29 U.S.C. 201 et seq.) I also certify that training or internships in the field of agriculture meet all requirements of the Migrant and Seasonal Worker Protection Act, as amended (29 U.S.C. 1801 et seq.).

11. I declare and affirm under penalty of perjury that the statements and information made herein are true and correct to the best of my knowledge, information and belief. The law provides severe penalties for knowingly and willfully falsifying or concealing a material fact, or using any false document in the submission of this form.

Signature of Supervisor \_\_\_\_\_

Printed Name of Supervisor \_\_\_\_\_ Date (mm-dd-yyyy) MM-DD-YYYY

**PRIVACY ACT STATEMENT**

**AUTHORITIES:** The information is sought pursuant to Section 102 of the Mutual Educational and Cultural Exchange Act of 1961, as amended (*the Fulbright-Hays Act*) (22 U.S.C. 2452) which provides for the administration of the Exchange Visitor Program (*J visa*).

**PURPOSE:** The information solicited on this form will be used to provide clarity of training and intern programs offered by entities designated by the U.S. Department of State to conduct exchange visitor programs; for general statistical use; and to administer the Trainee and Intern categories of the Exchange Visitor Program.

**ROUTINE USES:** The information on this form may be shared with entities administering the program on behalf of the Department; federal, state, local, or foreign government entities for law enforcement purposes; to members of Congress in response to a request on your behalf. More information on the Routine Uses for the system can be found in the System of Records Notice State-08, Educational and Cultural Exchange Program Records.

**DISCLOSURE:** Participation in this program is voluntary; however, failure to provide the information may delay or prevent participation in the Exchange Visitor Program.

**PAPER WORK REDUCTION ACT**

Public reporting burden for this collection of information is estimated to average 2 hours per response, including time required for searching existing data sources, gathering the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: ECA/EC, SA-4, U.S. Department of State, Washington, DC 20522.

DS-7002  
02-2018

Page 5 of 5

**CONTINUED TIPS  
ON PG 4:**

**SECTION IV:**

- **ADDITIONAL REMARKS-** Feel free to add additional details. The more complete the Training Plan, the better it can be evaluated by the visa officer.

**TIPS ON PG 5:**

- **MORE THAN 1 PHASE:** Please add multiple pages (of page 5) of there is more than one phase.
- **SIGNATURE-** Scanned copies and electronic signatures are acceptable.