

## Attestations by the Host Principal Investigator

(Please read carefully before initialing each item at left and signing below)

A. I certify that the Ph.D. student will not fill a staff vacancy or replace an employee who would otherwise be hired, full-time or part-time, and that the sole aim of the program is to assist the intern in achieving the objectives of the internship.

B. I understand that the Ph.D. student must leave the United States upon completion of the internship or upon dismissal of the Ph.D. student from the internship by me, the Host P.I.

C. I will advise the International Office (IO) of any changes in the intern's assignment, activities, or duration of stay. I will also advise the IO of dismissal of the Ph.D. student from the internship program that occurs prior to the completion date set forth on the DS-7002 Internship Plan.

D. I certify that sufficient resources, plant, equipment, and trained personnel are available to provide an appropriate learning environment for the specified internship; that I will provide continuous on-site supervision and mentoring of the intern and, as directed by me, by experienced and knowledgeable staff; I will ensure that the intern obtains skills, knowledge, and competencies through structured and guided activities such as lab and/or classroom training, seminars, attendance at conferences, and similar learning activities, as appropriate in specific circumstances.

E. I will complete and return the required evaluation reports to the IO at the midpoint and conclusion of the program. I understand that failure to provide the necessary reports, or to abide by other requirements of TSRI's Ph.D. Student Internship Program, will preclude future participation in the program.

F. I certify that the intern's background is sufficient to undertake the proposed internship and that the intern has sufficient English language skills to undertake and successfully complete the proposed internship.

G. I certify that the information provided in this application and in the DS-7002 Training/Internship Placement Plan is correct and accurately reflects the internship to be provided.

H. I understand that under the Ph.D. Student Internship Program requirements, the prospective intern must have health and accident insurance that meets Dept. of State standards (TSRI benefits meet these standards). As the host to this prospective Student Intern/External Graduate Student, I also understand and agree that I am obligated to offer the same benefits to this Student Intern/External Graduate Student as are offered to Research Associates.

Name of Ph.D. Student: \_\_\_\_\_

Sponsoring P.I.: \_\_\_\_\_

P.I.'s Signature: \_\_\_\_\_

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