

FOREIGN NATIONAL INFORMATION FORM (PAGE 1)

(1) Last or Family Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

(2) Social Security #: \_\_\_\_\_ (3) ID #: \_\_\_\_\_

(4) U. S. LOCAL STREET ADDRESS: \_\_\_\_\_ (5) FOREIGN RESIDENCE ADDRESS: \_\_\_\_\_

(4) Address Line 2: \_\_\_\_\_ (5) Address Line 2: \_\_\_\_\_

(4) Address Line 3: \_\_\_\_\_ (5) Address Line 3/City: \_\_\_\_\_

(4) City: \_\_\_\_\_ (5) Postal Code: \_\_\_\_\_ Province/Region: \_\_\_\_\_

(4) State: \_\_\_\_\_ Zip: \_\_\_\_\_ (5) Foreign Country: \_\_\_\_\_

(6) Country of Citizenship: \_\_\_\_\_ (7) Country That Issued Passport: \_\_\_\_\_

(8) Passport #: \_\_\_\_\_ (9) Visa #: \_\_\_\_\_

(not the control number that begins with a year)

(10) Have you ever had another immigration status in the United States?  Yes.  No If yes, see page 2.

(11) IMMIGRATION STATUS:

- U.S. Immigrant/Permanent Resident  F-1 Student  J-2 Spouse or child of Exchange Visitor  
 J-1 Exchange Visitor  H-1 Temporary Employee  
 Other: \_\_\_\_\_

(12) IF IMMIGRATION STATUS IS J-1, WHAT IS THE SUBTYPE? CHECK ONE:

- 01 Student  05 Professor  12 Research Scholar  
 02 Short Term Scholar  Other: \_\_\_\_\_

(13) WHAT IS THE ACTUAL PRIMARY PURPOSE OF THE VISIT? CHECK ONE:

- 01 Studying in a Degree Program  05 Observing  09 Demonstrating Special Skills  
 02 Studying in a Non-Degree Program  06 Consulting  10 Clinical Activities  
 03 Teaching  07 Conducting Research  11 Temporary Employee  
 04 Lecturing  08 Training  12 Here with Spouse

(14) WHAT IS THE ACTUAL DATE YOU ENTERED THE UNITED STATES?:  
FOR THIS PRIMARY ACTIVITY?:

\_\_/\_\_/\_\_  
Month/Day/Year

(15) WHAT IS THE START DATE OF YOUR IMMIGRATION STATUS

\_\_/\_\_/\_\_  
Month/Day/Year

(16) WHAT IS THE END DATE OF YOUR IMMIGRATION STATUS PRIMARY ACTIVITY?:

\_\_/\_\_/\_\_  
Month/Day/Year

(17) INCOME PROVIDING ACTIVITY (e.g. PROFESSOR OF CHEMISTRY)?:

(18) WHAT TYPE STUDENT?:

- Undergraduate  Masters  Doctoral  Other \_\_\_\_\_

(19) MARRIED

- Yes  No

SPOUSE IN USA?:

- Yes  No Number of dependents \_\_\_\_\_

(20) COUNTRY OF RESIDENCE IF DIFFERENT FROM FOREIGN RESIDENCE ADDRESS \_\_\_\_\_

Departure Date \_\_/\_\_/\_\_ (Month/Day/Year)

I hereby certify that all of the above information is true and correct. I understand that if my status changes from that which I have indicated on this form I must submit a new Foreign National Information Form to the Payroll Department.

Signature: \_\_\_\_\_ Local Phone Number: \_\_\_\_\_ Date: \_\_\_\_\_

**FOREIGN NATIONAL INFORMATION FORM (PAGE 2)**

The Foreign National Information Form must be completed before you can receive any form of payment.

PLEASE LIST ANY VISA IMMIGRATION ACTIVITY IN LAST THREE CALENDAR YEARS AND ALL F,J,M OR Q VISAS SINCE 1/1/85:

Date of Entry	Date of Exit	Visa Immigration Status	J-1 Subtype	Primary Purpose	Have You Taken Any Treaty Benefits	
					q Yes	q No
__/__/__	__/__/__	_____	_____	_____	q Yes	q No
__/__/__	__/__/__	_____	_____	_____	q Yes	q No
__/__/__	__/__/__	_____	_____	_____	q Yes	q No
__/__/__	__/__/__	_____	_____	_____	q Yes	q No
__/__/__	__/__/__	_____	_____	_____	q Yes	q No
__/__/__	__/__/__	_____	_____	_____	q Yes	q No
__/__/__	__/__/__	_____	_____	_____	q Yes	q No
__/__/__	__/__/__	_____	_____	_____	q Yes	q No
__/__/__	__/__/__	_____	_____	_____	q Yes	q No
__/__/__	__/__/__	_____	_____	_____	q Yes	q No

**VISA IMMIGRATION STATUS:**

- |   |  |   |
|---|--|---|
| <input type="radio"/> U.S. Immigrant/Permanent Resident | <input type="radio"/> F-1 Student            | <input type="radio"/> J-2 Spouse or child of Exchange Visitor |
| <input type="radio"/> J-1 Exchange Visitor              | <input type="radio"/> H-1 Temporary Employee |   |
| <input type="radio"/> Other: _____                      |  |   |

**PRIMARY PURPOSE:**

- |   |  |   |
|---|--|---|
| <input type="radio"/> 01 Studying in a degree program     | <input type="radio"/> 05 Observing           | <input type="radio"/> 09 Demonstrating Special Skills |
| <input type="radio"/> 02 Studying in a Non-Degree program | <input type="radio"/> 06 Consulting          | <input type="radio"/> 10 Clinical Activities          |
| <input type="radio"/> 03 Teaching                         | <input type="radio"/> 07 Conducting Research | <input type="radio"/> 11 Temporary Employee           |
| <input type="radio"/> 04 Lecturing                        | <input type="radio"/> 08 Training            | <input type="radio"/> 12 Here with Spouse             |
| <input type="radio"/> 99 Other, please specify: _____     |  |   |

I hereby certify that all of the above information is true and correct. I understand that if my status changes from that which I have indicated on this form I must submit a new Foreign National Information Form to the Payroll Department.

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

**HOW TO COMPLETE THE FOREIGN NATIONAL INFORMATION FORM:**

- Name: List full name (Last, First, Middle)
- Social Security Number: Enter US social security number issued by the US Social Security Administration not your ID number. Do not list numbers not assigned by the United States Social Security, i.e. Canadian social security number. All employees must have a social security number in order to work. If none enter your ITIN issued by the IRS.
- ID#: Enter your Employee/Student/Faculty Identification Number.
- Local Street Address: List your local US address.
- Residence: List your non US address.
- Country of Citizenship(s)
- Country that Issued Passport: List Country in which you were issued your passport. Not the country where it was issued.
- Passport #: Enter your passport number.
- Visa #: Enter your Visa number, not the control ID number.
- Immigration Status: Check yes or no. If yes, complete the above form for the time you were present in the United States. Approximate if you do not know.
- Immigration Status: Check the type of immigration status that you currently hold. If you check U.S. Immigrant/Permanent Resident, holder of a "green" card, you may proceed to the bottom of the form. Sign and date.
- Immigration Status for J-1: Check the appropriate J-1 subtype.
- Actual Primary Activity: Check one activity based on status.
- Actual Entry Date into the United States: Must include month, day, and year. Approximate if you do not know.
- Start Date: Must include month, day, and year. Approximate if you do not know.
- End Date: Must include month, day, and year. Approximate if you do not know.
- Occupation: Describe in general the service you will perform (Job Title and Department you are working)
- Type of Student: Check the appropriate box or write not applicable for non-students.
- Married: check appropriate box. Is your spouse in USA?: Check the appropriate box. Give number of other dependents in the USA.
- Tax residence is where you last paid taxes as a resident and can be different from legal residence. Do not include the USA.