



Name: _____
Last (Family Name) First (Given Name) Middle

U.S. Home Address (if applicable): _____

Home Country Address: _____

Current Visa Status/Type (if in the U.S.): _____ Expiration Date: _____

Email Address: _____ Telephone # with area code _____

Highest Degree Received: _____ Degree Field of Study: _____

Dept. Sponsor: Name: _____ Title: _____

E-mail Address: _____ Academic Department: _____

If you are currently in F-1 status, please provide your EAD end date (mm/dd/yyyy): _____

Have you ever held J-1 or J-2 visa status in the U.S.? No Yes

If yes, give dates of all previous periods in J-1 and/or J-2 status: _____

Have you been or are you now subject to the two-year home-residency requirement? No Yes

If yes, submit evidence that you are no longer subject to the two-year residency requirement (copy of I-612 waiver or evidence that you have met the two-year physical presence requirement). Submit copies of all DS-2019 forms and copies of visa stamps for all previous periods in J-1/J-2 status.

Date of Birth (mm/dd/yyyy): _____ Country of Citizenship: _____

Country of Birth: _____ City, Province of Birth: _____

Passport issued by (country): _____ Passport Number: _____

Passport Issue Date (mm/dd/yyyy): _____ Passport Expiration Date: _____

Date of Last Entry to U.S. (mm/dd/yyyy): _____ I-94 Number (if in U.S.): _____

If you have a U.S. Social Security Number, please list it: _____

If you are in the U.S., dates of intended travel within the next 6 months: _____

List the city and country of the U.S. embassy/consulate abroad where you will apply for the H-1B visa. This information is required even if you are in the U.S. and applying for a change of status:

City: _____ Country: _____

Complete the following section if you have ever before been in H (except H-4) or L (except L-2) status:

Employer's Name and Address	Start and End Dates of Employment in the U.S. (use mm/dd/yyyy format)	Start and End Dates of H and/or L status (use mm/dd/yyyy format)	Title on LCA
(Example) XYZ University University Address City, State Zip Code	1/20/2014 to 12/31/2016	1/01/2014 to 11/30/2016	Assistant Professor

Have you ever been denied H-1B or L-1 classification? No Yes (explain):

Are you a citizen or permanent resident of the U.S. or any other country? No Yes (explain):

Are you in [removal proceedings](#)? No Yes

Have you ever used a different legal name in the past? If so, please provide past name(s) here:

Dependents

If your dependents are included in this application and are residing in the U.S. in another immigration status, provide the following information and include copies of their passports, visas, and I-94 cards:

Complete Name	Date of Birth (mm/dd/yyyy)	Relationship

Certification Statement: I certify that the information contained herein is true to the best of my knowledge.

Further, with my signature, I certify that copies of documents submitted for the purpose of attaining an H-1B classification are exact photocopies of unaltered original documents. I understand that I may be required to submit original documents to U.S. Citizenship and Immigration Services or to the U.S. Consulate at a later date.

Signature: _____ Printed Name: _____ Date: _____
MM/DD/YYYY