

H-1B Applicant Information Form

(To be completed by applicant)

1. Name (as it appears on your passport):

Last/ Family Name: _____ First Name: _____

2. City of Birth: _____ 3. Country of Birth: _____

4. Country of Citizenship: _____ 5. Country of Permanent Residency: _____

6. Date of Birth: _____ 7. Social Security Number: _____

8. Current Visa Type (check one): F ___ J ___ H-1B ___ O ___ Other ___ None ___

9. Date current immigration status expires: _____ 10. Date of last entry into the U.S.: _____

11. Admission Number (on I-94 card): _____ 12. Telephone Number: _____

13. Email Address: _____

14. Local Residential Address:

15. Foreign (Non U.S.) Address:

Street: _____ Street: _____

City: _____ City: _____

State: _____ Province: _____

Zip Code: _____ Country: _____

Brown Box#: _____ Phone # (with Country Code): _____

16. Will you be in the U.S. while your H-1B petition will be processed? Yes ___ No ___

If you will be outside of the U.S., please list the U.S. Consulate where you will apply for your visa _____

17. Do you plan on traveling out of the U.S. while your H-1B petition is pending? Yes ___ No ___

18. Do you currently have a Permanent Residency Application pending? Yes ___ No ___

If yes, please provide A#: _____

19. Job title: _____ 20. Salary: _____

21. Department Name: _____

22. Department Administrative Contact: Name: _____

Email: _____ Telephone: _____

23. U.S Based Employment History: (Please provide employer name, job title and dates you worked for your last employers:

Employer	Job Title	Dates (to and from)

24. Visa History:

Immigration Type	Dates (to and from)

25. Do you have any family members residing with you who need to be included as dependents in your H-1B petition? Yes ___ No ___

Name	Relationship

OISSS10/1/08