

OPTIONAL H-1B Scholar Information Sheet (page 1 of 2)

(provides employing department information it needs from the scholar in order to complete forms in the packet)

TO BE COMPLETED BY THE SCHOLAR NAMED IN THE H-1B PETITION

CURRENT EMAIL OF THE SCHOLAR: _____

1. Family name (exactly as it appears in passport) _____

2. Given name (first name exactly as it appears in passport) _____

3. Middle name (if applicable and only if listed in passport) _____

5. All other names used _____

6. Date of Birth (mm/dd/yyyy) _____

7. U.S. Social Security # (if any) _____

8. USCIS A# (if any) _____

9. Country of Birth _____

10. Province of Birth _____

11. Country of Citizenship _____

12. Do you and any dependents filing with you have a valid passport? Yes _____ No _____

If you answer "no" please provide on a separate sheet of paper an explanation and/or proof that an extension has been applied for.

13. Are applications for dependents being filed with this petition? Yes _____ No _____

If you answer "yes" please indicate how many dependents are included _____

14. Are you or your dependents currently in U.S. immigration removal proceedings? Yes _____ No _____

If you answer "yes" please provide an explanation on a separate sheet of paper.

15. Has a U.S. immigrant petition ever been filed for any person in this petition, including dependents?

Yes _____ No _____ If you answer "yes" please provide an explanation on a separate sheet of paper.

16. Have you ever been given any H status of any kind (including H-4) before? Yes _____ No _____

If you answer "yes" please indicate all the dates on a separate sheet of paper.

17. Have you ever been denied H status? Yes _____ No _____

If you answer "yes" please explain on a separate sheet of paper.

18. Please provide a list of every period during which you have ever held J-1 or J-2 status in any J category. (Note: because the H-1B petition form asks for documentation of all J status periods, we will need you to provide documentation in the form of copies of DS-2019s, IAP-66s, or J-1/J-2 visa in passport

19. To help us file your H-1B petition in the most appropriate way for your situation, please list approximate dates and destinations of all your planned travel outside the U.S. in the next 12 months

**Optional H-1B Scholar Information Sheet (page 2 of 2)
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Complete ONLY ONE Section Below (Section A OR Section B, but not both).

SECTION A ***H-1B STATUS:*** Complete #19 - #26 ***ONLY IF*** you are currently in the U.S. and do ***NOT*** intend to leave the U.S. before beginning employment at Rutgers.

19. Date of Most Recent Arrival in the U.S., if applicable. _____

20. I-94# (from the most recent arrival/departure document) _____

21. Current Nonimmigrant Status in the U.S., _____

Note: if currently in H-1B status, you are eligible for Rutgers H-1B sponsorship only if you can document with copies of your 3 most recent pay stubs that you are still employed in your current H-1B job at the time Rutgers files its H-1B petition for you.

22. Date Status Expires, if applicable (F-1 and J-1 visa holders: put "D/S") _____

23. Passport Number _____

24. Date passport issued (mm/dd/yyyy) _____

25. Date passport expires _____

26. Current U.S. address _____

SECTION B ***H-1B VISA:*** Complete #27 and #28 ***ONLY IF*** you will be visiting a U.S. consulate abroad and applying for an H-1B visa ***prior to beginning employment at Rutgers.*** (*Note for Canadian Citizens only: unless you are changing to H-1B status within the U.S., please complete #27 and #28 even though you will NOT need to visit a U.S. embassy*)

27. The U.S. consulate or U.S. immigration inspection facility you will visit to obtain your U.S. H-1B (provide full name and complete address).

28. Your foreign address (your permanent address outside the U.S.) Please provide complete address.

By signing below, I certify that all of the above information is correct to the best of my knowledge AND that neither I nor any dependents are currently subject to regulation 212(e) which subjects certain J visa holders to a 2-year home residence requirement. (NOTE: If you ARE currently subject to this requirement, do not sign this form, but contact your department at Rutgers immediately.)

Signature

Date

PLEASE RETURN THE COMPLETED FORM TO YOUR DEPARTMENT ADMINISTRATOR AT RUTGERS