

H-1B Request Form

Please complete this form and return it to your department with all required supporting documents. Please see the checklist for more information regarding the additional documents required for this petition.

Personal Information:		
Name (Surname, First, Middle as in your passport):		
All Other Names Used (maiden name, aliases, etc.):		
Date of Birth (mm/dd/yyyy):	Gender:	
Email Address:	Phone:	
U.S. Social Security Number (if applicable): _____ - _____ - _____		
A# (usually J-2s with an EAD, F-1's on OPT, or those with pending permanent residency applications):		
Country & Province of Birth:	Country of Citizenship:	
Your Foreign Address (required):		
If currently in the U.S. please fill out below section. Otherwise skip to the next section.		
Date of Most Recent Arrival (mm/dd/yyyy):	I-94#:	
Current Non-Immigrant Status:	Expiration Date of Current Status (mm/dd/yyyy):	
Current U.S. Address:		
Passport Number:	Date Passport Issued:	Passport Expiration Date:
Do you have any plans to travel outside the U.S. in the next six months?) <input type="radio"/> Yes <input type="radio"/> No		
If yes, please list dates of travel: From: _____ To: _____		
Please complete this in case you need to obtain a visa or the change of status is denied:		
Location of U.S. Consulate or Inspection Facility:		
Type of Office: <input type="radio"/> Consulate <input type="radio"/> Pre-flight inspection (Canadians only) <input type="radio"/> Port of Entry (Canadians only)		
City:	U.S. State or Foreign Country:	

Do you have dependents? <input type="radio"/> Yes <input type="radio"/> No			
Only a spouse and unmarried children under age 21 can be considered dependents.			
If yes, please list all of your dependents:			
Name of Dependent as it Appears on Passport:	Age:	Relationship to You:	Current Status (if in the U.S.):
			Will this Dependent need an H-4? Yes or No

Have you or your dependents <i>ever</i> been denied an immigration benefit? If yes, explain on a separate sheet of paper.	<input type="radio"/> Yes <input type="radio"/> No
Do you have any criminal history? If yes, explain on a separate sheet of paper.	<input type="radio"/> Yes <input type="radio"/> No
Are you or any dependents in exclusion of deportation hearings?	<input type="radio"/> Yes <input type="radio"/> No

Petition Information:
Previous H-1B Status?
Have you ever been granted H-1B status? <input type="radio"/> Yes <input type="radio"/> No
If yes, please list all periods of stay in H status for the last 6 years. List only those dates in which you <u>were actually</u> in the U.S. in H-1B classification:
H-1B From: _____ To: _____
H-1B From: _____ To: _____
H-1B From: _____ To: _____
H-1B From: _____ To: _____
H-1B From: _____ To: _____
Have you ever been denied H-1B status? <input type="radio"/> Yes <input type="radio"/> No
Current H-1B Employer:
If currently in H-1B status, provide name of current employer if other than the University of St. Thomas:
Expected last day of employment with this employer:

Previous F Status:

SEVIS Number: _____ OPT Card Number: _____

Employment Authorization (OPT/STEM OPT) Dates: From: _____ To: _____

Previous J-1/ J-2 Status?

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

If you answered yes to the above question please choose one of the following and attach copies of all DS-2019s and waiver letters, if applicable:

- I have been in J-1 or J-2 status in the U.S., but have never been subject to 212(e)
- I am subject to 212(e) but a waiver request is currently pending
- I was subject to 212(e) but have a U.S. State Department waiver recommendation letter
- I was subject to 212(e) but have a waiver approval notice from USCIS
- I was subject to 212(e) but spent two years in my home country
- I am subject to 212(e) but have not applied for a waiver

List below all time spent in J-1 or J-2 status:

J-1 or J-2 From: _____ To: _____
 J-1 or J-2 From: _____ To: _____
 J-1 or J-2 From: _____ To: _____
 J-1 or J-2 From: _____ To: _____
 J-1 or J-2 From: _____ To: _____

Permanent Residency/ Exclusion?

Has anyone ever submitted an immigrant (permanent residency) petition for you or your dependents? Yes No

If yes, has Labor Certification been submitted? Yes No

Has an I-140 been filed? Yes No

Do you have a pending I-485 application to adjust status? Yes No

Do you plan to apply for Permanent Residency? Yes No

Academic:

Highest Academic Degree Earned:

Name of University that granted the degree:

If not from an institution in the U.S., you will need to include an Education Credentials Evaluation.

Major Field of Study:

USCIS U.S. Public Charge Determination

For all petitions seeking an extension or change of immigration status, Form I-129 includes several questions regarding U.S. public assistance funds. These questions ask whether you have, (1) ever applied for, (2) received, and/or (3) been certified to receive public assistance funds in the United States. In this case, the term "certified" means that you have been approved to receive public assistance funds but have not (yet) received them. Please read the questions carefully and answer them truthfully:

1. Since obtaining your current nonimmigrant status, have you received, or are you currently certified to receive ANY of the following benefits? (Check all that apply)
 - Any Federal, State, local, or tribal cash assistance for income maintenance
 - Supplemental Security Income (SSI)
 - Temporary Assistance for Needy Families (TANF)
 - Federal, State or local cash benefit programs for income maintenance (often called "General Assistance" in the State context, but which also exist under other names)
 - Supplemental Nutrition Assistance Program (SNAP) (commonly known as "food stamps")
 - Section 8 Housing Assistance under the Housing Choice Voucher Program, as administered by HUD
 - Section 8 Project-Based Rental Assistance (including Moderate Rehabilitation) under Section 8 of the U.S. Housing Act of 1937
 - Public Housing under section 9 of the U.S. Housing Act of 1937.

2. Have you received, applied for, or been certified to receive Federally-Funded Medicaid in connection with any of the following? ? (Check all that apply)
 - An emergency medical condition
 - For a service under the Individuals with Disabilities Education Act (IDEA)
 - Other school-based benefits or services available up to the oldest age eligible for secondary education under your state law
 - While under the age of 21
 - While pregnant or during the 60-day period following the last day of pregnancy

H-1 Conditions Acceptance:

I understand that:

- An individual in H-1B status may not receive payment from any source other than the St. Thomas department that sponsored the H-1 status or another H-1 concurrent sponsor except reimbursement for travel expenses for lecturing.
- If my St. Thomas employment ends, my H-1 petition becomes invalid.
- Any changes in employment, change in time, title, salary, responsibility, etc. may require a new H-1 petition to be filed with USCIS and I must contact OISS immediately.
- If I am dismissed from employment before the end date of my H-1 status, St. Thomas is responsible for paying the reasonable costs of return transportation to my last place of foreign residence.
- The hiring department is required to notify OISS when I terminate employment with St. Thomas.

All of the above information on these forms is complete and accurate.

Print Name _____

Signature _____ Date _____

H-1B Worker Checklist

Please submit one copy (no staples) of the items below to OISS:

All applicants:

- Copy of diploma AND English translation, if applicable
- Copy of official transcript (plus English translation, if applicable) A credential evaluation is required if degree is from a non-U.S. institution.
- Current resume/ CV
- Unaltered original document form and translation form, if applicable
- Passport identity page and expiration page

If currently in the U.S., also provide:

- I-94
- Entry visa

If applied for Permanent Residency:

- Copies of all notices received from USCIS

If ever in F-1 or F-2 status:

- Copies of all previous I-20's
- Copies of all previous EAD's, if applicable
- If on OPT, copies of all paystubs and list of employers worked while on OPT

If ever in J-1 or J-2 status:

- Copies of all previous DS-2019s/IAP-66s
- Copy of 212(e)/Two Year Home Residency waiver, if applicable

If in H-1 or H-4 status:

- Copies of all previous I-797 Approval Notices
- Copies of all H-1's last four months of paystubs

Dependent information (for those applying inside the U.S. only):

- Form I-539 completed by the dependent
- Proof of dependent relationship to H-1B applicant (marriage/birth certificate and English translation)
- Copy of dependents' I-94
- Copy of dependents' entry visa
- Copy of dependents' passport identity page and expiration page
- Evidence of current non-immigrant status
- Evidence of financial support
- [Petition fee for I-539](#) (check or money order in U.S. dollars payable to Department of Homeland Security)

Unaltered Original Documents

To the United States Citizenship and Immigration Services

Copies of documents submitted are exact copies of unaltered original documents. I understand that I may be required to submit original documents to an immigration or consular official at a later date.

Print Name of H-1B Worker

Signature of H-1B Worker

Date Signed

Translation of Foreign Language Documents

I, _____ hereby certify that I am competent to translate from the _____ language into English and that the attached is the accurate translation of the original document.

Print Name & Title of Translator

Signature of H-1B Worker

Date Signed