

International Services Office • University of Rochester

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H-1B Employee Questionnaire

Please print or type required information. Return all forms to your University of Rochester hiring department. This form should be completed for all types of H-1B petitions. If more room is needed to answer a question, please attach a separate sheet of paper. Please write "n/a" for questions that are not applicable to you. H-1Bs filed on behalf of the U of R are processed through the ISO and not by outside attorneys. Please review the required documentation list on page 8. For timely processing, please send all required documentation together.

1.	Name of H-1B employee		
	Surname or family name	Given or first name	Middle name
2.	Gender Male Female	University of Rochester telephone num	nber (if known)
3.	Name of University of Rochester Department wh	ere you will be an employee:	
3a.	. Name of your University of Rochester supervisor_		Phone extension #
4.	Marital status Married Engaged	Not Married	
5.	Date and place of birth Month/day/year	City State or province	Country
6.	Country of citizenship		
7.	Country of legal permanent residence		
8.	Passport information:		
	Passport #	Passport expiration date	
	Country of passport issuance		
9.	If you are currently outside of the U.S., list the loc citizens, please provide port of entry.	cation of United States Embassy or Consula	ate at which you will apply for visa. Canadian
	City Country (this is requi	red information)	
10.). If you are currently outside the U.S., please provi	ide your proposed port of entry into the U	.S. (airport, seaport, border crossing, etc.).
11.	Current or most recent position, occupation or p	rofession, and name of employer or schoc	l:

1 2	Chasify dograps hold	name of school		school is located	and year degrees were	
IZ.	Specify degrees field	. Hame of School.	country where	i scribbi is ibcated.	and vear degrees were	awarueu.

Degree	Field Degree Is In	Name of school	Country where school is located	Year degree was awarded

13.	Mailing address outside	of the U.S. (At least one comp	lete foreign address is require	ed. Use a relative's address if r	necessary.)
	Telephone number with cou	untry code	Mobile telephone nun	nber with country code	
	E-mail address				
14.	Provide a complete name, address, telephone and e-mail address for a person to contact in case of an emergency.				
	Name		Relationship to H-1B e	employee Language s	spoken
	Telephone number with cou	untry codo			
	relephone number with cot	antry code			
	E-mail address				
15.	Provide a complete Unite Do not give your laborate	ed States home address, if kno ory or office number.	own. If not, give address to the	e Office of Immigration Servic	es after arrival in the U.S.

Telephone number

Mobile telephone number with country code

E-mail address

 Provide a complete history of your visit- arrival dates in U.S. and departure dates 		the types of visas you used to enter the United States,	
Type of Visa	Arrival Date in U.S.	Departure Date from U.S.	
17. Are you physically located in: Unite	od States	rry:	
18. Are you requesting: an extension o	f current nonimmigrant status, which is		
a change of no	nimmigrant status from	to	
19. Have you ever been in the J-1 or J-2 nor	nimmigrant status? Yes No		
If yes, indicate which J category(ies):		
☐ Student ☐ Research Scholar	☐ Professor ☐ Short-term Scholar ☐ Tra	ainee Medical Trainee J-2 Dependent	
□ Other - specify:			
	O. Were you subject to the two-year home residency requirement?		
21. Have you ever applied for a waiver of the	ne two-year home residence requirement associ	iated with the J status?	
Yes No If yes	s, was it approved? Yes No	Pending	
22 If in the United States indicate suggested			
22. If in the United States, indicate current	non-immigrant status and expiration date:		
23. If in the United States, indicate last dat	e of entry and port of entry:		
23a. I-94 Number:			
*To locate your I-94 number, go to <u>CBP's I-94</u>	1 page.		

24.	Indicate the following <u>relatives who are permanent residents or citizens of the United States</u> :
	spouse parent child, specify age not applicable
	person you are engaged to be married to
	If <u>engaged to a United States citizen</u> , indicate date of the pending marriage:
25.	Have you ever filed, or has anyone ever filed for you, any forms, petitions, and applications or labor certification for lawful permanent residence at a US Immigration Office in the US or at a US Embassy or Consulate outside the U.S.? Yes No If yes, please provide details:
26.	Has any U.S. visa application of any kind filed by you, or for you, ever been denied? Yes No
Г	If yes, please provide details and location of US Consulate/Embassy:
27.	Are you, or any family members who will be accompanying you, currently in U.S. exclusion or deportation proceedings?
	Yes No If yes, please provide details:
28.	If you have a US Social Security number enter it here:
29.	My spouse and/or children: will accompany me to the University of Rochester and travel at the same time as me will accompany me to the University of Rochester and travel separately from me will remain outside of the United States currently reside(s) with me in the United States My spouse/child are not in a dependent status and are in their own status which is:
	□ other - please explain:
	NOTE: Please complete the ISO's Family Member Information form for spouse and/or children, single and under 21 years of age.
30.	List names, ages, and current non-immigrant statuses of all accompanying family members.
31.	If you are currently in the U.S. and are filing for a change of status to H-1B or an extension of H-1B status, please list any intended travel date outside the US over the next six months.
	Note: an H-1B or H-4 nonimmigrant should not travel outside the US while his or her petition is pending with USCIS.
32.	Please list any other information the University of Rochester needs to know in order to process your H-1B Petition.

33.	Are you currently working with an immigration attorney on permanent residence? Yes No If yes, what type of petition are you filing?
	Tryes, what type of petition are you ming.
33a	. If an I-140 and/or I-485 have been filed, please provide the date of filing and the status of the case.
	ease notify your attorney that any employer (U of R) sponsored I-140 petitions must be signed by Kathleen L. Strout or Janet R. Connor of ISO.
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Please return this signature page, in its ORIGINAL form (no fax, copy, or scan), to the ISO. This page is included with the petition to USCIS, and an original signature is required.

"Copies of documents submitted are exact photocopies of unaltered documents and I understand that I may be required to submit original documents to an Immigration of Consular official at a later date."
Signature:
Typed or printed name:
Date:

Please return this signature page, in its ORIGINAL form (no fax, copy, or scan), to the ISO.

The applicant for the H-1B non-immigrant status must read and sign the following.

The information given on this request form and on any attached sheet(s) is true, correct, and complete according to my best information. I have read the attached information sheets and will comply with the H-1B nonimmigrant status regulations and maintain at all times, for myself and any accompanying family members, during my stay in the United States, the required health insurance, medical evacuation insurance, and repatriation of remains insurance.

Printed Name	Date
Signature	Date

* Please return paperwork printed single-sided only, not double-sided*

Return this form, along with any Family Member Information forms, if applicable, to your University of Rochester Hiring Department

The hiring department will forward this form to the International Services Office at the University of Rochester

Employee Documentation Required for H-1B Petition

Submit the following documentation (as applicable to your case) to your hiring department along with your H-1B Employee Questionnaire.

- 1. A current photograph of the H-1B applicant and any accompanying family members with names printed on the back of the photograph(s). These photographs are for the University of Rochester immigration file and not USCIS. New photographs are not required for extensions filed by the University. Please make certain all copies are clear and readable.
- 2. Last two months' pay statements, if employed
- 3. If in the U.S., copies an electronic I-94 obtained from cbp.gov or both sides of the I-94 card for the H-1B employee/beneficiary
- 4. If currently in the U.S., include a copy of applicable immigration documentation:
 - If in the **F-1** status: copies of ALL I-20s, F-1 student documentation
 - If in the F-1 practical training status: copy of F-1 practical training employment authorization card and copies of ALL I-20s
 - If in the F-2 status: copy of spouse's I-20(s)
 - If in the **J-1** status: copy of ALL DS-2019s and IAP-66s and the waiver of the two-year home residency requirement from USCIS, if applicable
 - If in the J-1 Academic Training Status: copy of employment authorization letter from school of graduation and the waiver of two-year home residency requirement from USCIS, if applicable, and copies of all DS-2019s certificates.
 - If in the **J-2** status: copy of ALL of spouse's DS-2019s and the waiver of the two-year home residency requirement from USCIS, if applicable
 - If in the H-1B status: copy of ALL Form I-797 H-1B Approval Notices from the USCIS for present and past employers
 - If in the H-4 status: copy of ALL of spouse's Form I-797 H-1B Approval Notices and H-4 Approval Notices from the USCIS
 - If in the TN or TD status: copy of ALL previous I-94 cards and letters supporting the TN or TD status
 - If in the O-1 or O-3 status: copy of ALL Form I-797 O-1 and O-3 Approval Notices from the USCIS for present and past employers
- 5. If accompanied by spouse and/or children who will be a dependent of your H-1B status: Complete the H-1B Family Member Questionnaire.

 NOTE: The H-1B Family Member Questionnaire has separate required documentation and an application fee for dependents. The fee is paid for by the H-1B employee/beneficiary. Review pg. 4 of the H-1B Family Member Questionnaire for details.
- 6. Copies of degrees and transcripts in both the original language and English are required by USCIS.
- 7. Credential Evaluation is required for degrees received outside the U.S. Credential evaluation means converting foreign academic credentials into their U.S. If your highest degree is from a U.S. school, then you do not need to have your degree evaluated. One suggested credential evaluator is www.wes.org. However, you may use the credential evaluator of your choice, as long as they are a member of the Association of International Credential Evaluators (AICE) or the National Association of Credential Evaluation Services (NACES)
- 8. Copy of current curriculum vitae or resume
- 9. Copy of identity and expiration pages of passport for H-1B employee/beneficiary. The passport must be kept valid while in the U.S.
- 10. Copy of recent visa sticker

MEDICAL DOCTORS or DENTISTS ONLY

- 11. Copy of medical degree or dentistry degree and license in home country, translated into English.
- 12. Copy of ECFMG certificate documenting valid (not expired or about to expire) English exam certification OR

Pass results of ECFMG English exam. (Not required of graduates from accredited Canadian medical schools.)

13. Copy of pass results of:

USMLE – Steps I, II and III <u>OR</u> NBME – Parts I, II and III OR

FLEX Parts I and II

- Please note combinations of exams (e.g. USMLE Steps I and II and FLEX-Component II) are not acceptable
- 14. Copy of New York State medical or dental license.
- 15. Proof of residencies, fellowships and board certifications.