

FOREIGN NATIONAL INFORMATION FORM

The Foreign National Information Form must be completed before you can receive a tax treaty benefit. All applicable questions below must be answered. A copy of both sides of your I-94 Form "Arrival and Departure Record", (a small white card inside your passport, copy of your U.S. VISA from your passport, and I-20 or IAP66 must be attached to this form. This form must be returned before any check can be issued by the Payroll or Accounts Payable Department and must be completed by anyone receiving tuition remission/scholarship.

1. Last or Family Name _____ First _____ Middle _____

2. Social Security #: _____ 3. ID#: _____

4. U.S. Local Street Address _____ 5. Foreign Residence Address _____

4. Address Line 2: _____ 5. Address Line 2: _____

4. Address Line 3: _____ 5. Address Line 3/City: _____

4. City: _____ 5. Postal Code: _____ Province/Region _____

4. State: _____ Zip _____ 5. Foreign Country: _____

6. Country of Citizenship: _____ 7. Country That Issued Passport: _____

8. Passport #: _____ 9. Visa #: _____

10. Have you ever had another immigration status in the United States? Yes No If yes see section 2

11. Immigration Status:
 U.S. Immigrant/Permanent Resident F-1 Student J-2 Spouse or Child of Exchange Visitor
 J-I Exchange Visitor H-1 Temporary Employee Other _____

12. If Immigration Status is J-1, what is the subtype? Check One:
 01 Student 02 Short Term Scholar 05 Professor 12 Research Scholar Other _____

13. What is the actual primary purpose of the visit? Check One:
 01 Studying in a Degree Program 02 Studying in a Non-Degree Program 03 Teaching
 04 Lecturing 05 Observing 06 Consulting
 07 Conducting Research 08 Training 09 Demonstrating Special Skills
 10 Clinical Activities 11 Temporary Employee 12 Here with Spouse

14. What is the actual date you entered the United States? ____/____/____

15. What is the start date of your immigration status: ____/____/____

16. What is the end date of your immigration status primary activity? ____/____/____

17. Income providing activity: (e.g. Professor of Chemistry)?: _____

18. What type of student?:
 Undergraduate Masters Doctoral Other _____

19. Married Yes No Spouse in USA?: Yes No Number of Dependents _____

20. For Consultants/Self Employed Individuals:

Do you/will you have an office (fixed base in the USA)? Yes No If yes, how many days in this tax year did you/will you have an office (fixed base)? _____

21. Country of residence if different from foreign residence address:

Did tax residency end? Yes No If yes, when? ____/____/____

I hereby certify that all of the above information is true and correct. I understand that if my status changes from that which I have indicated on this form I must submit a new Foreign National Information Form to the Payroll Department.

Signature: _____

Local Phone Number: _____ E-Mail address: _____

Date: _____

SECTION TWO

The Foreign National Information Form must be completed before you can receive any form of payment. Please list any VISA Immigration Activity in last three calendar years and all F, J, M or Q Visas since 1/1/85:

Date of Entry	Date of Exit	Visa Immigration Status	J-1 Subtype	Primary Activity	Have you taken any treaty benefits
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

VISA IMMIGRATION STATUS:

- U.S Immigrant/Permanent Resident
- F-1 Student
- J-2 Spouse or child of Exchange Visitor
- J-1 Exchange Visitor
- H-1 Temporary Employee
- Other _____

PRIMARY PURPOSE:

- 01 Studying in a degree program
- 02 Studying in a Non-Degree program
- 03 Teaching
- 04 Lecturing
- 05 Observing
- 06 Consulting
- 07 Conducting Research
- 08 Training
- 09 Demonstrating Special Skills
- 10 Clinical Activities
- 11 Temporary Employee
- 12 Here with Spouse
- 99 Other, please specify: _____

I hereby certify that all of the above information is true and correct. I understand that if my status changes from that which I have indicated on this form I must submit a new Foreign National Information Form to the Payroll Department.

Signature: _____ Date: _____

HOW TO COMPLETE THE FOREIGN NATIONAL INFORMATION FORM

1. Name: List full name.
2. Social Security Number: Enter US social security number issued by the US Social Security Administration, not your ID number. Do not list numbers not assigned by the United States Social Security, i.e. Canadian social security number. All employees must have a social security number in order to work. If none, enter your ITIN issued by the IRS.
3. ID#: Enter your Employee/Student/Faculty Identification Number. (Not Applicable for Students)
4. Local Street Address: List your local US address.
5. Residence: List your non US address.
6. Country of Citizenship(s)
7. Country that Issued Passport: List Country in which you were issued your passport. Not the country where it was issued.
8. Passport#: Enter your passport number.
9. Visa#: Enter your Visa number.
10. Immigration Status: Check yes or no. If yes, complete section 2 for the time you were present in the United States. Approximate if you do not know.
11. Immigration Status: Check the type of immigration status that you currently hold. If you check U.S. Immigrant/Permanent Resident, holder of a "green" card, you may proceed to the bottom of section 2. Sign and date.
12. Immigration Status for J-1: Check the appropriate J-1 subtype.
13. Actual Primary Activity: Check one activity.
14. Actual Entry Date into the United States: Must include month, day, and year. Approximate if you do not know.
15. Start Date: Must include month, day, and year. Approximate if you do not know.
16. End Date: Must include month, day, and year. Approximate if you do not know.
17. Occupation: Describe in general the service you will perform.
18. Check the appropriate box.
19. Is your spouse in the USA?: Check the appropriate box. Give the number of other dependents in the USA.
20. Consultants/Self-employed Individuals: Check the appropriate box. This includes any office at any location specifically identified with you.
21. Tax residence is where you last paid taxes as a resident and can be different from legal residence. Do not include the USA.