

International Student and Scholar Services
H-1B Employee Application Form

Employee must complete form in its entirety and return with supporting documents as indicated on the H-1B Application Checklist in one email with attachments to hlee4@stevens.edu. All scanned or photocopied documents must be clear and legible.

Department Sponsor Information	
Supervisor Name:	Supervisor Title:
Supervisor E-mail:	Academic Department:

Biographical and Contact Information		
Last (Family) Name:	First Name:	Middle Name:
Other Names Used:		
Date of Birth:	Country of Citizenship:	
Country of Birth:	City & Province of Birth:	
U.S. Home Address (if applicable):		
Home Country Address:		
Email Address:	Telephone #:	

Nonimmigrant Status Information		
Passport issued by (country):	Passport Number:	
Passport Issue Date:	Passport Expiration Date:	
Are you currently in the United States? YES NO		
Current Visa Status:	Expiration Date:	Date of Last Entry to U.S.:
I-94 Number (if in U.S.):	U.S. Social Security Number, if applicable:	
If you are currently in F-1 status, please provide your EAD end date: _____		
Have you ever held J-1 or J-2 visa status in the U.S.? YES NO		
Date of all previous periods in J-1 and/or J-2 Status:		
Have you been or are you now subject to 212(e) , the two-year home residency requirement? YES NO		
If yes, submit a copy of Form I-612 if you received a waiver, otherwise, submit evidence that you are no longer subject to 212(e). Submit copies of all DS-2019 forms and copies of visa stamps for all previous periods in J-1/J-2 status.		

General Information

Highest Degree Received:		Primary Field of Study:	
Required for Initial, Extension and Change of Status applicants: List the city and country of the U.S. embassy/consulate abroad where you will apply for the H-1B visa.			
City:		Country:	
Have you ever been denied the immigration classification you are now requesting?		No	Yes
If yes, explain:			
Are you in removal proceedings?		No	Yes
If yes, explain:			
If you are in the U.S., dates of intended travel within the next 6 months:			

Previous Periods of H-1B Status

Please complete the following section if you have ever before been in H-1B status:

Employer's Name and Address	Start and End Dates of Employment	Job Title	Visa Type
(Example): XYZ University 1 Main Street Hoboken, NJ 07030	8/15/2010 to 07/01/2011	Administrator	H-1B

Dependent Information

If your dependents are included in this application, provide the following information and include copies of passports, marriage certificate & birth certificate(s) for minor children; I-94 cards, if currently in U.S.:

Complete Name	Date of Birth	Relationship

Beneficiary Certification

I certify that the information contained herein is true to the best of my knowledge. Further, with my signature, I certify that copies of documents submitted for the purpose of attaining H-1B classification are exact photocopies of unaltered original documents. I understand that I may be required to submit original documents to U.S. Citizenship and Immigration Services or to Consular officials at a later date.

Signature:	Printed Name:	Date:
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