



Foreign National Information Form

This form must be completed before a foreign national can receive any form of payment (honorarium, scholarship, or wages).

Please fill in all information to the best of your knowledge:

PERSONAL INFORMATION

Last or Family Name: _____ A# _____

First: _____ Middle: _____

U.S. Social Security No. or Individual Taxpayer Identification No.: _____

Date of Birth: _____ (month/day/year)

U.S Telephone No.: _____

Email Address: _____

U.S. Local Address:	Foreign Residence Permanent Address:
Street _____	Street _____
City _____	City _____ Province/State _____ Postal Code _____
State _____ Zip Code _____	Country _____

PASSPORT INFORMATION

Country of Citizenship: _____

Country that issued passport: _____

Passport No.: _____ Expiration Date: _____

VISA INFORMATION

Visa No.: (8 digit red number in Lower Right Corner of Visa): _____

What type of Visa do you have: _____ Expiration Date: _____

- U.S. Immigrant/Permanent Resident (attach copy of green card)
- H1B Temporary Worker
- J-1 Exchange Visitor **If J-1 Exchange Visitor, what J-1 category*

- F-1 Student
- B1/B2 Visitor
- Other: _____

PRIMARY ACTIVITY DURING THIS VISIT

Student	Professor	Research Scholar	Short Term Scholar	Other: _____
Studying in a degree program	Observing	Demonstrating special skills		
Studying in a non-degree program	Consulting	Clinical activities		
Teaching	Conducting Research	Temporary Employment		
Lecturing	Training			

What was the start date of your immigration status for this activity?
(The date you first entered the U.S. for primary activity - I-94 departure record) _____
Month / Day / Year

What is the projected end date of your primary activity?
(Completion date on immigration document, I-20, DS2019, or end date of employment) _____
Month / Day / Year

INCOME TYPE and AMOUNT

Please circle one

Wages Scholarship/Fellowship Honorarium Prize/Award Other _____

Name of USU department providing the income: _____

Amount (estimated yearly amount): _____

RESIDENCY VERIFICATION

What country did you live in before this visit to the U.S.? _____

Is this your country of residency for tax purposes? Yes No

If not, list the country you claim for tax residency _____

US IMMIGRATION HISTORY

What is the date of your first visit to the United States? _____
Month / Day / Year

Have you ever had another immigrant status in the United States? Yes No

If Yes, Please list previous immigration status(s): _____ Date(s): _____

Did you attend any Colleges or Universities in the **United States** before Utah State University? Yes No

If Yes, Please list Dates and Names of Colleges or Universities you have attended:

Have You Taken Any Tax Treaty Benefits while attending these Colleges or Universities? Yes No

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

Signature _____

Date: _____

* Please bring this document to Julie Gaines in the **Payroll Office** (Controller's Office Old Main Room 026)
Phone: 435-797-1059