

H1-B Questionnaire

Please submit completed form to your hiring department at Lehigh University. All information is required. Please do not leave any blanks.

Name (as appears in passport):	ily/Last	Given/First	Middle	<u> </u>
Other Names Used (if applicable):	-			,
Email Address:	Phone N	lumber:		
.IN ID (if applicable):	Social Security # (if applicable):			
Passport Number:	Passpor	t Issued:		
			(Month/Day/Yea	ır)
Expiration of Passport:		Ionth/Day/Year)		
Date of Birth:	Country	of Birth:		
(Month/Day/Year)				
Province/State of Birth:	Country	of Citizenship:		
Country of Permanent Residence:	Highest	Degree Earned:		
lajor Field of Study:				
Name & Address of Degree Granting Institutio	n:			
Foreign Address:				
oreign Address	Street Addre			
			Destal Os de	
Sity	State		Postal Code	
JS Address:	Street Addre			
Dity	State		Postal Code	
lave you held H1B or H4 status within the last siz	x years?		Yes	No
Have any family member (s) held H1B or H4 status in the last six years If yes, please list names, dates, and status held:		years?	Yes	No
Have you ever been denied a petition for H1B status?			Yes	No
Have you ever been in J-1 or J-2 status?			Yes	No
f yes, were you subject to the 2-year home residency requirement?			Yes	No



H-1B Questionnaire (continued)

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Have you returned home for 2 years or received a waiver? Yes No Have you ever applied for US Permanent Residency (green card)? Yes No On what basis did you apply? Yes No Have you ever been in exclusion or deportation proceedings? Yes No Are you currently residing in the United States? If currently OUTSIDE of the United States: Address of Consulate/Embassy where you will apply for visa: _____ When do you plan to enter the US? _____ (Month/Day/Year) If Canadian, which Port of Entry do you plan to use? _____ If currently IN the United States: Current Immigration Status: _____ Expiration of Current Status: ___ (Month/Day/Year) Expiration of Work Authorization (if applicable): _____ Expiration of Visa: _____ (Month/Day/Year) (Month/Day/Year) I-94 Number: Date of last entrance to US (as listed on I-94 card): _____ Expiration of I-94: ____ (Month/Day/Year) (Month/Day/Year) Do you plan to travel outside the US while your H1B petition is pending? Yes / No If yes, list places and dates of travel: If you are currently employed elsewhere, where are you employed? _____ When do you expect to terminate that employment? _____ **If you are currently in H1B status, you should not terminate your current employment until a new H1B application by Lehigh University has been submitted and a receipt has been received from immigration services. Do you have a spouse or children who will apply for, or extend, H4 dependent status? Yes / No Please list name, date of birth, and current visa status for each non-US citizen dependent.