

H-1B EXTENSION QUESTIONNAIRE

(To be completed by the employing department or project director)

ABOUT THE EMPLOYEE:

Name: _____
Last/Family *First* *Middle*

Date of birth: ____/____/____ U.S. Social Security #: ____-____-____
MM *DD* *YY*

Country of birth: _____ Province of birth: _____

Country of citizenship: _____

Residence address in the U.S. _____

(Please note that the USCIS and Immigration Services must be notified within 10 days of a change of residence address)

Telephone numbers: _____ (home) _____ (work)

E-mail address: _____

Most recent residence address in home country:

Street Address

City *State/Province* *Postal Code* *Country*

IMMIGRATION HISTORY:

Expiration date of current H-1B status: ____/____/____
MM *DD* *YY*

Prior periods in H-1B status:

<i>Employer</i>	<i>Receipt Number</i>	<i>From</i>	<i>To</i>	<i>Salary per year</i>

Within the past 7 years, has the individual
- been denied H-1B status or an H-1B visa? _____ Yes _____ No

Has the individual ever been granted J-1 or J-2 status? _____ Yes _____ No
If yes, was the individual subject to the two-year home residency requirement?

Has the individual ever been granted another immigration status? _____ Yes _____ No
If yes, please provide details _____

