

H-1B Visa-Beneficiary Data Collection Form

UNIVERSITY PERSONNEL - FACULTY AFFAIRS | ADMIN RM 218 ATTN: Christie Martinez | christie.martinez@sjsu.edu Tel: 408-924-6670 | Fax: 408-924-2425

INSTRUCTIONS:

In order to begin the H-1B application process <u>ALL</u> of the following items must be sent to University Personnel - Faculty Affairs. Regular processing of an H-1B visa may take two to five months after the United States Citizenship and Immigration Services (USCIS) receives the initial petition. Premium processing is also available for a fee of \$1225. Premium processing takes approximately two to four weeks. We cannot guarantee H-1B approval either through regular processing or premium processing. A prospective employee **MAY NOT** begin employment without appropriate work authorization.

Please note that while UP - Faculty Affairs will facilitate the H1-B process, we do not provide legal advice.

Remember that it is ultimately the employee's responsibility to maintain legal work status

Applicant Checklist

- Data Collection form (Beneficiary)
- Photocopy of current passport (all pages plus outside cover)
- Photocopy of I-94 Card (front and back)
- Photocopy of ESTA, if applicable
- I-797 Approval Notices, if applicable
- I-20 forms, (F-1 Visa) if applicable
- EAD Card, if applicable
- DS 2019 (J-1 Visa) forms, if applicable

Department/School Checklist

- Collection form (Departmental)
- Job Offer Letter
- Applicant's SC-1 form
- Transcripts of Terminal Degree
- Curriculum Vitae
- Letters of Recommendation
- Recruitment Report
- Nationally Published Announcement
- \$500 for Fraud Prevention and Detection
- \$460 for I-129 application or renewal application fee

Processing Fees, each check must be written separately to Department of Homeland Security

- \$460 for I-129 petition, H-1B visa (approx. 2-5 months), paid by Department/ School or College
- \$500 for Fraud Prevention and Detection, paid by your Department/ School or College
- \$1225 for Premium Processing, if desired (approx. 4 weeks), paid by faculty

▶ E	Basis for H-1B Classification									
	□ New employment									
	☐ Continuation of previously approved employment without change with the same employer									
	☐ Change of employer (Current H-1B status with another employer)									
▶ F	Personal Data									
1.	Legal Name:									
	Family /Last Name	Given/ First Name		Middle Name						
2.	Other Names Used:									
	Family Name	Given Name		Middle Name						
3.	Date of Birth	Social Security # (if any)	Alien #	(if any)						
4.	Country of Birth	City of Birth								
5.	Country of Citizenship									
6.	Date of Last U.S. Arrival	1-94 # (Arrival/Departure Document)_								
7.	Passport #	Date Passport Issued	Date Passpo	ort Expires						
8.	Current Nonimmigrant Status	Date Status Expires								
) (Current Address Failure to report a change of address within 10 days to USCI	S is punishable by fine or imprisonment and/or rem	noval. <u>http://www.</u>	uscis.gov/files/form/ar-11.pdf						
	Street Address	City	State	ZIP Code						
9.	Home Phone #	Work Phone #	Cell Phone i	#						
10.	Email Address									
	If Outside the United States, Complete the	Following:								
11.	U.S. consulate or inspection facility you want notified if this petition is approved,									
	Type of Office (Select only one hox):	☐ Consulate ☐ Pre-flight	inspection	□ Port of Entry						

12.	Office Address									
	Street Address	City		U.S. Sta	ate or Country					
13.	13. Applicant's Foreign Address Failure to report a change of address within 10 days to USCIS is punishable by fine or imprisonment and/or removal. http://www.uscis.gov/files/form/ar-11.pdf									
	Street Address	City		States_						
	Province	Postal Code	e	Countr	у					
١	isa History									
14.	Are applications for dependents being filed		□ Yes	□ No						
15.	Are you on removal proceedings?		□ Yes	□ No						
16.	Have you ever been denied H-1B status in the pas	t?	□ Yes	□No						
	If yes, dates:									
	(If you answered yes, please attach a separate sheet and explain.)									
17.	Are you currently on optional practical training (C	PT)?	□ Yes	□No						
	If yes, what is your SEVIS # (from 1-20)?									
	When does your OPT period expire?									
	What is your EAD card #?									
18.	Did you have CPT prior to graduation?		□ Yes	□ No						
	If yes, dates on CPT - From:		To:							
19.	Have you ever held J-1 status in the past?		□ Yes	□No						
	(If yes, please send copies of all Forms DS-2019 and J-1 visa in passport.)									

20. Begin with your most recent visa class and list all previous classes held:

Visa Classification Begin and end date		s of status	Purpose of stay and location (school or institution)			
▶ Employment Offered/ Hig	hest Level of Educat	tion				
21. Job Title			Yearly Salary		Start Date	
22. Highest Degree Earned						
23. Field of Study			Date Degree Conferred			
24. University						
Street Address		City		States		
Province		Postal Code		Country _		
Signature of H-1B Applicant ▼				Date ▼		

Please return this completed form and all supporting documents to:

Christie Martinez

San José State University | Office of Faculty Affairs | ADM 218 One Washington Square, San José, CA 95192-0021 USA

> Phone: (408) 924-6670 Main: (408) 924-2450 Fax: (408) 924-2425