

FOREIGN NATIONAL INFORMATION FORM (PAGE 1)

The Foreign National Information Form must be completed before you can receive any form of payment.

All applicable questions below must be answered. A copy your I-94 Form, your U.S. VISA from your passport, and a copy of your I-20 or DS-2019 must be attached to this form. If you have any questions, please call Kristie Peppers at 850-474-3169.

(1) Last or Family Name: _____ First: _____ Middle: _____

(2) UWF ID #: _____

(3) U.S. LOCAL STREET ADDRESS:

Address Line 2: _____

Address Line 3: _____

City: _____

State: _____ Zip: _____

(4) FOREIGN RESIDENCE ADDRESS:

Address Line 2: _____

City: _____

Postal Code: _____ Province/Region: _____

Foreign Country: _____

(5) Country of Citizenship: _____ (6) Country That Issued Passport: _____

(7) Passport #: _____ (8) Visa #: _____

(9) Have you ever had another immigration status in the United States? () Yes. () No. If yes, see page 2.

(10) IMMIGRATION STATUS:

U.S. Immigrant/Permanent Resident F-1 Student J-2 Spouse or Child of Exchange Visitor

J-1 Exchange Visitor H-1 Temporary Employee

Other: _____

(11) IF IMMIGRATION STATUS IS J-1, WHAT IS THE SUBTYPE? CHECK ONE:

01 Student 05 Professor 12 Research Scholar

02 Short Term Scholar Other: _____

(12) WHAT IS THE ACTUAL PRIMARY ACTIVITY OF THE VISIT? CHECK ONE:

01 Studying in a Degree Program 05 Observing 09 Demonstrating Special Skills

02 Studying in a Non-Degree Program 06 Consulting 10 Clinical Activities

03 Teaching 07 Conducting Research 11 Temporary Employment

04 Lecturing 08 Training 12 Here with Spouse

(13) WHAT IS THE ACTUAL DATE YOU ENTERED THE UNITED STATES?

____ / ____ / ____

Month Day Year

(14) WHAT IS THE START DATE OF YOUR IMMIGRATION STATUS FOR THIS PRIMARY ACTIVITY?

____ / ____ / ____

Month Day Year

(15) WHAT IS THE PROJECTED END DATE OF YOUR IMMIGRATION STATUS PRIMARY ACTIVITY?

____ / ____ / ____

Month Day Year

(16) OCCUPATION:
(e.g. PROFESSOR OF CHEMISTRY)

(17) TYPE OF STUDENT:

Undergraduate Masters

Doctoral Other _____

(18) SPOUSE IN USA:

Yes No

Number of dependents _____

(19) FOR CONSULTANTS/SELF EMPLOYED INDIVIDUALS:
Do you / will you have an office (fixed base) in the USA?

Yes No If yes, how many days in this tax year did you / will you have office (fixed base)? _____

Days

(20) COUNTRY OF TAX RESIDENCE IF DIFFERENT FROM FOREIGN RESIDENCE ADDRESS:

Did tax residency end? Yes No If yes, when ____ / ____ / ____

Month Day Year

FOREIGN NATIONAL INFORMATION FORM (PAGE 2)

PLEASE LIST ANY VISA IMMIGRATION ACTIVITY IN LAST SIX CALENDAR YEARS

<u>Date of Entry</u>	<u>Date of Exit</u>	<u>Visa Immigration Status</u>	<u>J-1 Subtype</u>	<u>Primary Purpose</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

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 this form I must submit a new Foreign National Information Form to the Payroll Department.

Signature: _____ Phone Number: _____ Date: _____

INSTRUCTIONS:

1. Name: List full name.
2. UWF ID#: Enter your Employee/Student/Faculty Identification Number.
3. Local Address: List your local US address.
4. Foreign Residence Address: List your non-US address.
5. Country of Citizenship(s)
6. Country that Issued Passport: List the country in which you were issued your passport.
7. Passport #: Enter your passport number.
8. Visa #: Enter your VISA number (an 8-digit number in RED on Visa in your passport)
9. Immigration Status: Check yes or no. If yes, complete the above form for the time you were present in the United States.
10. Immigration Status: Check the type of immigration stat that you currently hold. If you checked US Immigrant/Permanent Resident, you may proceed to the bottom of this form and sign.
11. Immigration Status for J-1: Check the appropriate J-1 subtype.
12. Actual Primary Activity: Check one activity.
13. Actual Entry Date into United States: Must include month, day and year.
14. Start Date: Must include month, day and year.
15. End Date: Must include month, day and year.
16. Occupation: List the service you will perform.
17. Check the appropriate box
18. Is your spouse in the USA? How many dependents in USA?
19. Consultants/Self-employed: Check appropriate box.
20. Tax residence is where you last paid taxes as a resident. May be different from legal residence. Do not include the USA.