

Nonresident Intake and Information Form

PURPOSE

This form must be completed before you can receive any form of payment. All applicable questions below must be answered. The following documents must be attached to this completed form:

1. Copy of Passport; 2. Copy of Visa; 3. Copy of I-94 Departure Record;
4. Copy of Social Security card or ITIN card; 5. Copy of Form I-20 or Form IAP66/DS2019.

PERSONAL / PASSPORT INFORMATION

Last or Family Name: _____ First: _____ Middle: _____
SSN or ITIN: _____ Date of Birth: ____ / ____ / ____ (Month/Day/Year)
Employer: _____ Email Address: _____
U.S. Telephone No. (Work): _____ U.S. Telephone No. (Home): _____
Country of Citizenship: _____ Country that Issued Passport: _____
Passport No.: _____ Passport Expiration Date: ____ / ____ / ____ (Month/Day/Year)
Visa No: _____

ADDRESSES

U.S. Local Street Address: _____ Foreign (Home) Residence Address (No P.O. Box):
Address Line 1: _____ Address Line 2: _____
Address Line 2: _____ City: _____ City Postal Code: _____
City: _____ State: ____ Zip: _____ Province/Region: _____
Region Postal Code: _____
Country: _____

CURRENT IMMIGRATION STATUS

U.S. Immigrant/Permanent Resident F-1 Student OTHER: _____
 H-1B Temporary Worker J-2 Dependent
 J-1 Exchange Visitor DACA
--IF J-1 Exchange Visitor, what category?
 Student Professor Research Scholar Short Term Scholar Other: _____

PRIMARY ACTIVITY DURING THIS VISIT (Choose only one)

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 Here with spouse

ADDITIONAL INFORMATION

What is the date you first entered the United States? Please estimate if unknown. _____ / ____ / ____ (Month/Day/Year)
(This date is the first trip you ever made to the United States)

What was the start date of your immigration status for the current activity? _____ / ____ / ____ (Month/Day/Year)
(This date is stamped on your visa and I-94 Departure Record)

What is the projected end date of your primary activity? _____ / ____ / ____ (Month/Day/Year)
(In many cases, this is the completion date on your immigration document.)

If you are a student, at what level do you study? Undergraduate Masters Doctoral Other: _____

Describe the activity that will result in U.S. income (i.e. employee, professor of physics, consulting, teaching assistant, food service worker, scholarship, contest prize, etc.): _____ Job Title: _____

Name of agency/department providing the income: _____ Amount: _____*

* For Wages the amount should be the estimated annual income (Calendar Year)

Payment Type: Wages Scholarship Honorarium Other _____
