

Sponsoring Department Letterhead

**SAMPLE LETTER FOR POSTDOCTORAL
APPOINTMENTS ONLY (H-1B Visa)**

Date

Name of Dept. Chair/Title

Dear Dr. _____:

I am writing to request your approval for a **(visa type J-1/H-1B)** application for **(applicant name)** as **(job title)** in the Department of **(department name)**.

(Applicant name) received his/her degree from **(University Name)** in **(year)**. **(Give detailed description of the candidate's qualifications that satisfy the requirement of "possessing highly specialized knowledge")**

With the approval of his/her **(visa type)**, **(applicant name)** will be re/appointed as a **(title)** in my lab with an annual salary of **(\$ amount)**. **(State the job description, period of appointment, and location of activities – specify any off-campus sites if any)**

***If requesting an H-1B add the following:** H-1B non-immigrants will be paid at least the actual wage level paid to all other individuals with similar experience and qualifications for the specific employment in question, or the prevailing wage level for the occupation in the area of employment, whichever is higher. The department will pay the reasonable cost of return transportation for **(applicant name)** if he/she is dismissed from employment before the end of the period of authorized stay. The department will provide accurate information for reviewing deemed exports license requirements and ensure continuous compliance with U.S. Export Control regulations regarding the Release of Controlled Technology or Technical data to Foreign Persons in the United States. We will fully comply with the terms of the approved labor condition application.

(Applicant name) will be supported by **(source of funding)**. A copy of **(applicant name)** curriculum vitae and Postdoctoral Appointment Request Worksheet are attached. All other documents required for visa processing will be provided to the Office of International Affairs according to current H-1B Visa Documentation Checklist.

Thank you for your consideration of my request.

Sincerely,

Name of PI/Faculty Member
Title

Disapproved () Approved ()

Disapproved () Approved ()

Name Date
Chairman, (Name of Dept)

John H. Byrne, Ph.D. Date
Director – Office of Postdoctoral Affairs