



The Employment Equity Office

Phone: (805) 756-6770. Fax (805) 756-7150. employeequity@calpoly.edu

H-1B APPLICANT INFORMATION FORM

This form is intended to provide information for a Cal Poly employee (current or prospective) who will be the beneficiary of an H-1B petition. This form should be completed by the H-1B beneficiary and submitted to the Employment Equity Office along with the request for an H-1B Petition form. Faxed copies are accepted.

Employee Name:

Family Name (CAPS): First Name: Middle Name:

Current Phone Number:

Home: Work: E-mail Address:

Current Mailing Address:

Date of Birth: **Country of Birth:** **City of Birth:**
(mm/dd/yyyy)

Country of Citizenship: **Country of legal, permanent residence (if different):**

US Social Security #: **Alien Registration Number (if known) :**
(If none, write "none") (8-9 Digits preceded by an 'A')

Are you currently in the U.S.? Yes No **Are you currently employed by Cal Poly?** Yes No

If you are currently in the U.S. please answer the following:

Last Date of Arrival: Admission Number on I-94:
mm/dd/yyyy mm/dd/yyyy

Current immigration status: Date current immigration expires:

Please check ONE of the following:

- I am currently in the U.S. and am requesting a change to or an extension of H-1B status to be effective on:
(mm/dd/yyyy)
- I will apply for an H1-B visa at the U.S. Embassy or consulate in:
(city, country)
- I am a citizen of Canada and will enter the U.S. at:
(port of entry)

Which U.S. Embassy or consulate is closest to your home in your home country?

If you are applying for a change or extension of status in the U.S., would you still like a U.S. Embassy or consulate notified of the petition approval? Yes No

If YES, which embassy or consulate? (list city and country)

Your address in your home country:

Passport Expiration Date:

mm/dd/yyyy

Will/do you have a spouse and/or children with you in the U. S. ? Yes No

If YES please fill out Table 1 on Page 3.

PLEASE ANSWER ALL OF THE FOLLOWING QUESTIONS:

Has your attorney applied for Labor Certification for you? Yes No

Has your attorney filed an I-140 petition (Permanent Residence) for you? Yes No

Have you applied for permanent residence status (filed an I-485)? Yes No

Are you (or any of your dependents listed in the Table 1) in exclusion or deportation proceedings with the USCIS?

Yes No

If you answered YES to any of the questions above, please give details on separate sheet of paper and provide copies of related documents and attach them to this application.

IF THIS IS THE FIRST H-1B PETITION TO BE FILED FOR YOU BY CAL POLY:

Have you (or any of your dependents applying for H-4 status) EVER held J-1, J-2, H-1B, or H-4 immigration status? Yes No

Please list your U.S. immigration status for the past seven years in Table 2 (page 3). If your dependent(s) is/ are applying for a change of status of H-4, please also give their immigration status for the past seven years.

See Page 4 for a list of required documents that must be submitted with this completed application form. Please remember to complete any applicable tables (see page 3). When complete, please print, sign and date in the box below. Return the completed form AND attached required documents to the Employment Equity Office.

I certify that the above information is correct. I request that Cal Poly submit an H-1B petition on my behalf. I also request a change of status to H-1B if so indicated above.

Signature: _____ please print and sign	Name: _____ print or type	Date: _____ mm/dd/yyyy
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PLEASE COMPLETE THE FOLLOWING TABLES IF APPLICABLE:

Table 1. Please fill out this table if you checked YES on page 2, "Will/do you have a spouse and/or children with you in the U.S.?" You may use and attach an extra sheet of paper if additional space is needed.

Name	Immigration Status	Dates	Employer or Sponsor (J-1 or H-1B Only)

Table 2. Please list your U.S. immigration status for the past seven years. If your dependent(s) is/are applying for a change of status to H-4, please also give their immigration status for the past seven years (attach additional sheets if necessary)

Name	Relationship (spouse, son, daughter)	Date of Birth	Currently in the U.S.?	Expiration Date of Passport/Passport Issued by (Country Name)

**THE FOLLOWING DOCUMENTS MUST BE SUBMITTED WITH
THIS H-1B APPLICANT INFORMATION FORM:**

A separate check or money order in the amount of \$300 payable to USCIS only if you have dependents currently in the U.S. who will require a change of status to H-4. One check (\$300) covers all dependents.

Copy of:

- Your I-94 (arrival/departure records)
- ALL of your I-20s or IAP-66s/DS-2019s, if applicable
- Your U.S. Social Security Card
- Your Employment Authorization Document (EAD), if applicable
- Your curriculum vitae or resume
- University transcripts and/or diploma which documents your degree; if these documents are not in English, provide an English translation.
- Job offer/appointment letter
- Your passport information pages, including the page indicating the passport expiration date
- Previous H-1B petition(s) and supporting documents, if applicable
- I-94s of all dependents applying for H-4 status
- Marriage Certificate, if requesting H-4 status for spouse
- Birth Certificates for all dependents
- Passport information pages, including the page indicating the passport expiration date, of all dependents applying for H-4 status.