

NON-RESIDENT ALIEN DATA FORM

Name: _____ Date of Birth: _____ SSN: _____

Local Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Academic Major: _____

Work Phone: _____ Advisor: _____

Cell Phone: _____

Emergency Contact: _____ Relationship: _____

Emergency Contact Phone Numbers: _____

Country of Citizenship: _____ Visa type upon entry to U.S.: _____

Current Visa Type: _____ Date Visa Acquired: _____

Permanent Foreign Address: _____

Passport Number: _____

EEO Requirements:

____ Male ____ White ____ Black ____ Hispanic ____ American Indian

____ Female ____ Asian/Pacific Islander

List below all entry dates to the U.S. and exit dates from the U.S.

Entry

Exit

Attach a copy of I-20, Passport, and Visa