FOREIGN NATIONAL DATA FORM

All foreign national visitors must complete this form and submit to the Foreign National Employment Office in the Division of Human Resources before any type of payment will be processed through the University (i.e. payroll, assistantship, honorarium, travel, lodging, reimbursement expenses, etc.). Failure to provide the requested information will delay the process and/or payment to or on behalf of the visitor. ALL applicable questions must be answered. Incomplete forms will delay the clearance and verification process.

Refer to the instructions page to complete the Foreign National Data Form and confirm the <u>required supporting</u> <u>documentation</u> that must be submitted along with the completed form.

| SECTION 1: Personal Information | | | | | |
|--|---|--|--|--|--|
| | Gender | 🗌 Male 🔲 Female | | | |
| | | | | | |
| Last/Family Name | First Name | Middle Name | | | |
| | | | | | |
| U.S. Federal ID# (i.e. social security number) | NCA&TSU Banner ID# | Date of Birth (mm/dd/yyyy) | | | |
| SECTION 2: Contact Information | | | | | |
| Telephone Number | | | | | |
| Local | University (if applicable) | | | | |
| Email Address | | | | | |
| NCA&TSU | Alternate | | | | |
| SECTION 3: U.S. Local Address | | | | | |
| Address | | | | | |
| | | | | | |
| City | State | Zip Code | | | |
| SECTION 4: Foreign Residence Add | tress | | | | |
| Address Line 1 | | | | | |
| Address Line 2 | | | | | |
| City | | | | | |
| Country | | | | | |
| SECTION 5: Citizenship, Residency | | | | | |
| Section 5. Citizenship, Residency | | | | | |
| Country of Birth | Country of Citizenship | Country of Permanent Residence | | | |
| | | | | | |
| Country Issued Passport | Passport # | Visa # (# located bottom right on visa page) | | | |
| SECTION 6: Current Immigration S | tatus in U.S. | | | | |
| F-1 Student | TN Professional | | | | |
| J-1 Exchange Visitor | J-2 Spouse or Child of Exchange Visitor | | | | |
| H-1 Temporary Employee | Other: | | | | |
| SECTION 7: If Immigration Status i | s I-1. What is the Subtyne? | | | | |
| Student | Professor | | | | |
| Short-term Scholar | Research Scholar | | | | |
| | | | | | |



Division of Human Resources

North Carolina Agricultural and Technical State University

FOREIGN NATIONAL DATA FORM

| SECTION 8: Prin | mary Purpose of 1 | This Visit | | | | | |
|--|--|--------------------------------|--------------------------------|-------------------------|----------------------------|--|--|
| 02 Studying 03 Teaching 04 Lecturing | 3 | 07 Condu 08 Trainin | lting Icting Research ng | 10 Clinical A | ary Employment | | |
| SECTION 9: Student Type and Financial Sponsorship {This section for NCA&TSU students only} | | | | | | | |
| Undergraduate Masters Doctoral Other | | | | | | | |
| Will you receive any financial sponsorship from the University (i.e. assistantship, on campus job)? 🛛 Yes 🗌 No | | | | | | | |
| If yes, specify. | If yes, specify. 🗌 Graduate Assistant 🗌 On Campus Employment 🦳 Sponsoring Department | | | | | | |
| SECTION 10: Sponsoring Department & Income for Activity {Skip this section if you are a NCA&TSU student} | | | | | | | |
| Sponsoring Depa | | | • | nent Contact | | | |
| Is the sponsoring | department provid | ling any pay compe | nsation directly to ye | ou? 🗌 Yes [| No | | |
| Is the sponsoring department providing any reimbursement expenses to you? | | | | | | | |
| Is the sponsoring department providing any travel/lodging or per diem expenses on your behalf? 🗌 Yes 🗌 No | | | | | | | |
| SECTION 11. Co | ountry of Tax Resi | idence | | | | | |
| SECTION 11: Country of Tax Residence Do you have tax liability in your country of citizenship? Yes No Not Applicable | | | | | | | |
| - | | | ry of citizenship? | Yes No | Not Applicable | | |
| Is your country of tax residence the same as your country of citizenship? U Yes No Not Applicable If no, specify country: | | | | | | | |
| When did tax res | idency end? Specify | y month/year. | | | | | |
| | r Consultant/Self | Employed Indivi | duals 🗌 Not | Applicable (Not a co | nsultant or self-employed) | | |
| | u have an office (fix | | | Yes No | isultant of sen-employed) | | |
| | | | le office (fixed based | | # of days | | |
| | | | | | // 0/ 00/0 | | |
| SECTION 13: Sp | ouse Information | า | Not Applicabl | e (No spouse or childro | en in U.S.) | | |
| Spouse in U.S.? | Yes No | Nun | nber of children in U | .S | | | |
| SECTION 14: Er | ntry and Activity [| Dates | | | | | |
| What is the actual date you entered the United States? (I-94/Stamp Entry Date) mm/dd/yyyy | | | | | | | |
| What is the start date of your immigration status or primary activity? mm/dd/yyyy | | | | | | | |
| What is the projected end date of your immigration status or primary activity? | | | | | | | |
| SECTION 15: Visits to the U.S. | | | | | | | |
| Have you visited the U.S. prior to your current entry date? Yes No If yes, specify below. | | | | | | | |
| Include any visits to the U.S. for the last eight (8) years in any entry status. | | | | | | | |
| | Date of Exit | Visa Status | | | Did you take any | | |
| Date of Entry (month/date/year) | (month/date/year) | (B-1, WB, F-1, J-1, H-1, etc.) | (Refer to Section 7 | | treaty benefits? | | |
| | | | | | Yes No | | |
| | | | | | Yes No | | |
| | | | | | Yes No | | |
| | | | | | Yes No | | |
| | | | | | | | |
| | | | | | Yes No | | |

Certification

I hereby certify that all the above information is true and accurate. I understand that if my status changes from that which I have indicated on this form, I will immediately notify the Foreign National Employment Office in the Division of Human Resources.



FOREIGN NATIONAL DATA FORM

INSTRUCTION PAGE

Supporting Documentation: Attach copy of valid passport information, visa, I-94 (front/back) and Form I-20/DS-2019

• Section 1: Personal Information

- Select gender, if male or female
- List Full Name (Last/Family, First, and Middle)
- Enter United States Social Security Number (SSN) issued by the U.S. Social Security Administration.
 - NOTE: All employees must have a US Social Security Number
 - Do not list numbers not assigned by U.S. Social Security Administration
 - If you do not have a SSN, but have been issued an Individual Tax Identification Number (ITIN) by the Internal Revenue Service (IRS) – Enter here
 - If SSN not yet received, attach proof that you have filed with the Social Security Administration
- Enter Banner ID # assigned to all NCA&TSU employees and/or students
- Section 2: Contact Information
 - Telephone Number: List local telephone number (i.e. cell phone, home, or contact) <u>and/or</u> University Department telephone number (if applicable)
 - Email Address: List email address issued by NCA&TSU and list an alternate email address (i.e. @gmail.com, hotmail.com, yahoo.com)
- Section 3: U.S. Local Address

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- o List local address in the United States (home address or hotel address for short-term visitors)
- Section 4: Foreign Residence Address
 - List your non-U.S. address (residential address in foreign place of residence)
- Section 5: Citizenship and Passport Information
 - o List Country of Citizenship: If you have dual citizenship, please list all applicable countries
 - List Country of Permanent Residence
 - List country of authority under which your passport was issued
 - Enter your passport number
 - Enter your visa number (this number is located bottom right on visa page)
 - If entered under WB visa waiver program, you will not have visa number
- Section 6: Current Immigration Status in U.S.
 - Check the type of immigration status you currently hold
- Section 7: If Immigration Status is J-1; What is the Subtype?
 - Check the appropriate J-1 subtype (Listed on Form DS-2019 as Exchange Visitor Category)
 - Section 8: Primary Purpose of This Visit
 - Check **applicable** activity(s)
- Section 9: Student Type and Financial Sponsorship
 - Select appropriate degree level or specify other
 - o Check yes or no if you will receive an assistantship or work on campus through a NCA&TSU department
 - o If checked yes, specify type of employment and list name of employing department
- Section 10: Sponsoring Department and Income for Activity
 - List department that extended invitation for visit/activity at NCA&TSU and department contact person
 - Check yes or no if you will receive any direct payment for activity (i.e. honorarium, etc.)
 - Check yes or no if you will receive any type of reimbursement expenses (i.e. travel, lodging, etc.)
 - o Check yes or no if the sponsoring department will pay direct expenses on your behalf (i.e. travel, lodging, etc.)
 - Section 11: Country of Tax Residence (DO NOT include USA)
 - o Check yes or no.
 - o Check yes or no. If no, list country where you last paid taxes as a resident
 - o Check "not applicable" if there are no require tax payments in home country or country of residency
- Section 12: For Consultant / Self-Employed Individuals
 - Check the appropriate box. This includes any office at any location specifically identified with you
- Section 13: Spouse Information
 - Check "not applicable" if you have no spouse or children in the U.S.
 - o Check yes or no to confirm if spouse in the U.S. and/or list the number of children in U.S. (if applicable)
- Section 14: Entry and Activity Dates
 - List **actual date** you entered the United States: Use the last issued I-94; otherwise specify by last entry date stamp in passport (received at port-of-entry per last arrival in U.S.)
 - o List start date of your immigration status
 - List end date of your immigration status
- Section 15: Visits to the U.S.

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- Check yes or no if you have ever visited the U.S prior to the current entry date
 - List all/any visits to the U.S. within the last eight (8) years and state the visa status of each visit • Start with most current entry date
- CERTIFICATION
 - Review the Foreign National Data Form to ensure that all information is complete and accurate prior to signature. This section must have an original signature and date