

FOREIGN NATIONAL DATA FORM

The Foreign National Information Form must be completed before you can receive any form of payment from the Payroll or Accounts Payable departments. All applicable questions must be answered.

Last (Family) Name: _____ First: _____ Middle: _____

Social Security Number or Individual Taxpayer Identification Number: _____ - _____ - _____ Visa No. _____

Virginia Tech (Hokie) ID: _____ Date of transfer to Virginia Tech (if applicable) _____

Date of very first (1st) time you ever arrived in the United States (US) for any purpose and Visa Type: _____

Country of Citizenship: _____ Country That Issued Passport: _____

U.S. LOCAL ADDRESS:

FOREIGN RESIDENCE ADDRESS:

City: _____

City: _____

State: _____ Zip: _____

Province: _____ Zip: _____

E-mail Address (VT preferred) _____

Country: _____

Country of Tax Residence if Different From Foreign Residence Address: _____

Did tax residency end? Yes No If Yes, when _____/_____/_____
Month / Day / Year

INCOME PROVIDING ACTIVITY AT VIRGINIA TECH: (What is your occupation or generally describe the service you will performs)

FOR CONSULTANTS OR SELF-EMPLOYED INDIVIDUALS:

Do you or will you have an office (fixed base) in the United States? Yes No

If "Yes", how many days in this tax year did you/will you have an office (fixed base)? _____ days.

CURRENT IMMIGRATION STATUS:

- U.S. Immigrant/Permanent Resident
- H-1B Worker in Specialty Occupation
- Other _____
- J-1 Exchange Visitor
- J-2 Dependent of Exchange Visitor (EAD Required)
- F-1 Student
- OPT or CPT

- B1/B2 Visitor for Business/Tourism
Days performing services at VT _____
- WB/WT Visa Waiver Visitor for Business/Tourism (ESTA Program)
Days performing services at VT _____

What is the Start Date of This Immigration Status (**Issue date of visa**)? _____/_____/_____
Month / Day / Year

IF F-1 VISA STATUS WHAT IS STUDENT TYPE? CHECK ONE:

- Undergraduate
- Other _____
- Masters
- Not Applicable
- Doctoral

IF J-1/J-2 VISA STATUS, WHAT IS THE SUBTYPE? CHECK ONE:

- Student
- Short Term Scholar
- Professor
- Other _____
- Research Scholar

WHAT IS THE ACTUAL PRIMARY ACTIVITY OF THE VISIT? CHECK ONE:

- 01 Studying in a degree program
- 03 Teaching
- 04 Lecturing
- 05 Observing
- 06 Consulting
- 07 Conducting Research
- 08 Training
- 11 Temporary Employee
- 12 Here with Spouse
- 15 Student Intern

What is the actual date you entered the United States for this primary activity? _____/_____/_____
Month / Day / Year

What is the end date of your immigration status' primary activity? _____/_____/_____
Month / Day / Year

I give my permission to Virginia Tech to access my electronic I-94 to verify entry/exit information or to obtain a missing I-94 document. PLEASE COMPLETE THE REVERSE SIDE OF THIS FORM WITH YOUR VISA HISTORY AND SIGNATURE.

PLEASE LIST ALL USA - F, J, M, Q OR H VISA IMMIGRATION ACTIVITY SINCE 1/1/1985

<u>Date of Entry</u>	<u>Date of Exit / Change of Status</u>	<u>Visa Immigration Status</u>	<u>J-1 Subtype</u>	<u>Primary Activity</u>	<u>Have you taken any tax treaty benefits?</u>
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE LIST ALL OTHER UNITED STATES VISA IMMIGRATION ACTIVITY IN LAST THREE (3) CALENDAR YEARS

____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
____/____/____	____/____/____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby certify that all of the information on this form is true and correct. I understand that if my status changes from that which I have indicated on this form, I must submit a new Foreign National Data Form to the Payroll Department.

Signature: _____ Date: ____/____/____