H-1B EXTENSION QUESTIONNAIRE FOR EMPLOYEE

*Please attach a copy of your most current vitae

EMPLOYEE:	
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Name:		
Last/Family	First	Middle
Any other names used:	Date o	f Birth:
		MM/DD/YY
Country of Birth:	City of Birth	
Province of Birth:		
Country of Citizenship:		
Residence address in the U.S		
(Please note that USC	IS must be notified within 10 days of a cha	nge of residence address)
Telephone Number:	(home)	(other)
E-mail address:		
Most recent residence address in	eet Address	
City State	te/Province Postal Co	de Country
Most recent date of entrance to the	ne US	<u></u>
Current I-94 #	**Please provide	a copy of your current I-94**
Passport Number		
Date passport issued	Date passport ex	xpires
<u> </u>	pages in your passport needed to	•
IMMIGRATION HISTORY:		
Expiration date of current H-1B		
Prior periods in H-1B status:	MM DD YY	
Employer	F	From To
Employer	F	From To

Within the past 7 years - been denied H	s, have you I-1B status or an H-1	B visa?	Yes_	No			
Have you ever been gr If yes, were you subject	anted J-1 or J-2 statu	s? Yes	No				
Have you ever been gr If yes, please provide of							
It must be comp		mployee is in the Uends to apply for a	J.S. or not a	nd whether o			
Choice of U.S. Consu	·		Porder Dog	t (Canadians (Only)		
City: Border Post (Canadians Only) Reminder: The H-1B petition cannot be filed without the above information							
DEPENDENTS IN T	HE UNITED STAT	<u>'ES:</u>					
If you are in the United	d States with a spouse	e and/or children, p	lease indicat	te below:			
Name	Date of Birth	Country of Birth	<u>Immig</u>	ration Status	Relationship		