

Press the **Tab** button to enter information into the fields.
 For assistance completing this form, please contact USF Payroll, SVC 0067, (813)974-8401

Please check on of the following:

- Initial Submission** as part of USF Appointment Package
 Update – Required only if any information in Section B, C, or D changes during individual’s stay in the U.S.

Please attach a copy of the following to this form:

- Social Security Card U.S. Visa Passport I-94 Departure Record
 I-20, DS2019 or I-797 (immigration documents)

SECTION A – General Information

Last Name / Surname: _____ First Name: _____ Middle Initial: _____

GEMS Employee ID #: 000000 (11-digit number) Date of Birth: / /
Month / Day / Year

U.S. Local Street Address	Foreign Residence Address
Line 1: _____	Line 1: _____
Line 2: _____	Line 2: _____
City / Town: _____ State: _____	City / Town: _____
Postal Code: _____	Region / Province: _____
Phone Number: _____	Postal Code: _____
Email Address: _____	Country: _____
If married, is spouse in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No	Number of dependents in U.S. (excluding spouse) _____

SECTION B – Visa and Passport Information

Visa Control Number: _____ Visa Issue Date: / /
Month / Day / Year

Visa Type (Select One):

- | | | | | |
|------------------------------|--|---|-------------------------------|--|
| <input type="checkbox"/> B-1 | <input type="checkbox"/> WB (Visa Waiver for Business) | <input type="checkbox"/> J-1 Research Scholar | <input type="checkbox"/> H-1B | <input type="checkbox"/> J-1 Student |
| <input type="checkbox"/> B-2 | <input type="checkbox"/> WT (Visa Waiver for Tourism) | <input type="checkbox"/> J-1 Short-Term Scholar | <input type="checkbox"/> TN | <input type="checkbox"/> F-1 Student |
| | <input type="checkbox"/> Canadian Walk-Over (no visa) | <input type="checkbox"/> J-1 Professor | <input type="checkbox"/> O-1 | <input type="checkbox"/> Other – Please specify: _____ |
| | | <input type="checkbox"/> J-1 Alien Physician | | |
| | | <input type="checkbox"/> J-1 Intern | | |

Primary Purpose / Activity of Visit (Select One):

- | | | |
|---|--|---|
| <input type="checkbox"/> Studying in a degree program | <input type="checkbox"/> Consulting | <input type="checkbox"/> Conducting Research |
| <input type="checkbox"/> Studying in a non-degree program | <input type="checkbox"/> Teaching | <input type="checkbox"/> Acquiring Training |
| <input type="checkbox"/> Lecturing | <input type="checkbox"/> Clinical Activities | <input type="checkbox"/> Temporary Employment |
| <input type="checkbox"/> Other – Please specify: _____ | | |

Country of Citizenship: _____ Country Issuing Passport: _____

Passport Number: _____ Passport Expiration Date: / /
Month / Day / Year

SECTION C – Visa Immigration Activity

What is the actual date you entered the U.S. on your current visa? _____
Month / Day / Year

What is the start date and end date of your primary purpose / activity indicated on your current I-20, DS2019 (IAP-66), I-977 (immigration document)?

Start Date: _____ End Date: _____
Month / Day / Year Month / Day / Year

U.S. Visa Immigration History (add additional sheets if necessary)

List all visits to the U.S. in the last 3 calendar years.

List all F, J, M, or Q visa periods since Jan 1, 1988. (*Students do not need to list short vacations home during semester breaks.)

<u>Date of U.S. Entry</u> <small>Month / Day / Year</small>	<u>Date of U.S. Exit</u> <small>Month / Day / Year</small>	<u>Visa Type</u>	<u>Primary Purpose of Stay</u>	<u>Have you taken any 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

SECTION D – Residence Status for Tax Purposes

Prior to your current visit to the U.S., in what country were you employed and paying taxes? _____

Please check the appropriate box. If you are unsure, leave blank and the Payroll Tax Administrator will determine your status.

- I am a U.S. Permanent Resident. Alien Registration Receipt Card (Green Card) Number: _____
- I am or have been classified previously as a Resident Alien for tax purposes.
- I am a Non-Resident Alien for tax purposes. I do not meet the requirements for tax residence in the U.S.

SECTION E – To Be Filled Out By Individuals Receiving Honorarium Payments

- Is the activity to receive the Honorarium to last more than 9 days? YES NO
- Did you receive an Honorarium from more than 5 Organizations in the prior 6 months? YES NO
- Is the activity to be performed a normal academic activity? YES NO

CERTIFICATION

If your country has a tax treaty with the U.S., but you elect NOT to use these benefits, please initial here: _____

I certify that all of the above information is true and correct. I understand that if my "Passport and Visa Information" changes, I must submit a new "Foreign National Information Form" reflecting the changes to the Payroll Tax Administrator in University Payroll (SVC 0067) at the University of South Florida, 4202 E. Fowler Avenue, Tampa, FL 33620.

Signature: _____ Date: _____

FOR OFFICIAL USE ONLY

Employee ID _____
 Working Dept. _____
 Job Code _____
 FICA Status _____
 Annual Salary _____

U.S. Tax Treaty Countries			
Australia	Greece	Luxembourg	South Africa
Austria	Hungary	Mexico	Spain
Barbados	Iceland	Morocco	Sweden
Belgium	India	Netherlands	Switzerland
Canada	Indonesia	New Zealand	Thailand
China	Ireland	Norway	Trinidad
Cyprus	Israel	Pakistan	Tunisia
Czech Republic	Italy	Philippines	Turkey
Denmark	Jamaica	Poland	Ukraine
Egypt	Japan	Portugal	Union of Soviet Socialist Republics
Estonia	Kazakhstan	Romania	United Kingdom
Finland	Korea	Russia	United States Model
France	Latvia	Slovak Republic	Venezuela
Germany	Lithuania	Slovenia	