



<b>Subject's Name</b> Last name, First Name	<b>Period of Stay</b> From <i>mm/dd/yy</i> to <i>mm/dd/yy</i>	<b>Status</b> <b>H1/H4</b>	<b>Name of Employer</b>

5. Have you ever been denied H-1B status previously?  Yes  No **If yes**, please provide details on back of this form.

6. Are you currently in exclusion or deportation proceedings?  Yes  No

7. Have you ever held J-1 status?  Yes  No

Dates you held J-1 status: \_\_\_\_\_ to \_\_\_\_\_ **If yes**, were you subject to the 2-year foreign residency requirement?  Yes  No

8. Did you receive a waiver?  Yes  No **If yes**, please enclose 2 copies of the waiver letter

**Section III – Complete the following if you are in the U.S.**

Date of Last Arrival (mm/dd/yyyy): \_\_\_\_\_ I-94# retrieved from this link <https://i94.cbp.dhs.gov/I94/#/home>

Current nonimmigrant status: (e.g., F-1, J-1, H-1B): \_\_\_\_\_ Expiration date of current status (mm/dd/yyyy): \_\_\_\_\_

Current U.S. Address: \_\_\_\_\_

If your dependent family members are changing to H-4 status or extending H-4 status, give the following information:

Last Name, First Name	Current Status	Expiration date	Relationship to you

Do you and all family members have a valid passport?  Yes  No

**Note:** Dependents must complete Form I-539 and I-539A, Application to Extend/Change Nonimmigrant Status.

Section IV - If you earned a Master's or higher degree from a U.S. institution of higher education, provide the following information

Name and address of the U.S. institution:

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Date Degree Awarded (mm/dd/yyyy): \_\_\_\_\_ Type of U.S. degree: \_\_\_\_\_