



Health Science Center at Houston

H-1B BIODATA INFORMATION FORM

Section 1: Personal Information

Last/ Family Name *As it appears on passport	First/Given Name		Middle Name		
Other Names Used (Please include nickna	mes, aliases, maiden name, and name		nes from all previous marriages)		
Last/Family Name	First/Given Name		Middle	Name	
Date of Birth: Month/Day/Year	☐ Male or ☐ Female		e Marital Status (Married/Single/Divorce		/Divorced/Widowed)
U.S. Residential Address: Street # & Nam	ne Apt#	City	State	· · · · · · · · · · · · · · · · · · ·	Zip Code
City of Birth	Country of Birth		Country	of Citizenship	
Country of Legal Permanent Residence	E-mail Address				
Applicant's Foreign Address:	Street # & Name		Apt#	City	
	State/Province		Country	Postal Code	

Section 2: U.S. Immigration Information

Are you currently in the U.S.? \Box Yes \Box No

• If Yes, please indicate your current U.S. non-immigrant status and date of last arrival:

	U.S. Non-Immigrant Status (e.g. H-1E
	If Yes, please disclose all U.S. immig
7 Approval/Rec	 If Yes, please provide copies of <u>any</u> stamps along with entry/exit stamps
<u>U.S.</u>	 notices, EAD (front and back), any US Date your current U.S. non-immigrant
	 Form I-94 Number issued on your las
	A-Number (if applicable):
	Employment Authorization Document
	 If yes, please provide travel dates: M ou are currently <u>outside</u> the U.S., list the lonadian citizens, please provide port of entry
	/
	s any U.S. visa application of any kind filed
ion Services	If yes, please provide details and loca
	ve you ever been subject to deportation pro
	• If yes, please provide details of status
i -	If yes, please provide details and loca

Passport Information:

Do you have	a pa	assport valid for at least six months into the future?	🗌 Yes	s 🗌 No			
• If Ye	es, p	please provide the information below:					
Nan	ne (a	as it appears on the passport)					
Cou	untry	of Issuance		Expiration Date	(MM/DD/YYYY))	
<u>J Exchanç</u>	ge \	/isitor Information:					
Have you eve	er be	een in the U.S. under a J-1 or J-2 visa status?	🗌 Yes	🗌 No			
		Chronological listing of all previous Exchange Begin date of DS-2019 or IAP-66 End date of DS-2019 or IAP-66 Departure date from U.S. Category of sponsorship (e.g. Alien Physician, Program sponsor name Name (s) of training institution (s) Source of funding while on J status (e.g. U.S. C personal funds, Fulbright, etc.) Legible copies of any and all Form DS-2019 or vere/are you subject to the two year home residency	Research Sovt Agenc IAP-66 issu requireme	Scholar, Studen sy, Intl. Organiza ued to you and/o nt?	t, Trainee, etc.) tion, EV Govt., or your depende □ Yes	Program	e birth.
	0	If Yes, please explain using the space below on whet waiver, Exceptional Hardship, etc.) did you seek the space below on whet the space below on the space below on whet waiver, Exceptional Hardship, etc.) did you seek the space below on the space below on whet waiver, Exceptional Hardship, etc.) did you seek the space below on the space below on whet waiver, Exceptional Hardship, etc.) did you seek the space below on the space		y (e.g. No Objecti	on, Interest Gov	t. Agency,	Conrad
	0	If Yes, please use the space below to provide the o your waiver:	ate the waiver wa	s filed, case stat	us and ca	se number of	
		Status					
		Case Number					
	0	If yes, please attach to this form a copy of the v	vaiver reco	ommendation an	d/or waiver app	oroval.	

If No, please provide evidence to establish that you have fulfilled the two-year home residency requirement by establishing that
you have resided and been physically present in the country of last residence or nationality for an aggregate of at least two
years following departure from the United States (e.g. U.S. entry stamps and exit stamps in passport, proof of travel
arrangements, proof of domicile (rental agreements, local driver's license, etc.). <u>Residence in a third country does not satisfy
the 212(e) rule, whether or not it meets or exceeds the required two-year period.</u>

• If No, please explain using the space below and provide evidence to establish that you are not subject to the two-year home residency requirement while on J status.

S tu	dent Info	rmation:					
ave y	ou ever bee	n in the U.S. under a	an F-1 or F-2 visa status?	🗌 Yes	🗌 No		
•	Have you Technolog	Begin date of Form I- End date of Form I- Departure date from Program sponsor in Legible copies of an Legible copies of E ever been issued ar gy Engineering Math f Yes, did you have in f Yes, did you have in	g of all previous F1 student I-20 20 1 U.S.	to you and/or ard (s) bocument (EAD itatus? [nployment dur bloyment in ST) for Optional Yes [ing your appr EM OPT?	Practical Trainin No roved period of O	
		ease explain your pe					
.S.; ı om ı	e note that may lose a	t if you exceed th all future immigra o the U.S. for 3 ye	e period of unemploymen tion benefits; and, may b ears, 10 years, or perman	nt, you may e subject to		-	
.S.; om Vis	e note that may lose a returning t a Informa	t if you exceed th all future immigra o the U.S. for 3 ye a <u>tion:</u>	e period of unemploymer tion benefits; and, may b	nt, you may e subject to lently.		-	
.S.; om Vis	e note that may lose a returning t <u>a Informa</u> rou ever bee If Yes, ple	t if you exceed th all future immigra o the U.S. for 3 yo ation: on in the U.S. on the	e period of unemploymen tion benefits; and, may b ears, 10 years, or perman	nt, you may e subject to hently. 1-4 etc.)? [Unlawful P	Presence rule v	vhich may bar yo
S.; om Vis ave y •	e note that may lose a returning t a Informa rou ever bee If Yes, ple sheet of p	t if you exceed th all future immigra o the U.S. for 3 young ation: on in the U.S. on the ease provide specific paper if needed):	e period of unemploymen tion benefits; and, may b ears, 10 years, or perman "H" classification (e.g. H-1B, H	nt, you may e subject to hently. 1-4 etc.)? [tus by actual c	Unlawful P	Presence rule v	vhich may bar yo

• If you answered Yes to any of the questions in this section, you must attach to this form legible copies (front & back (of all immigration documents issued to you and/or your dependents, such as passport showing biographical page & expiration date, I-94 Record, or Form I-797).

Have you	u had H-1B status in the past seven years? ☐ Yes	🗌 No			
	ease provide information on the space below if you have now requesting within the last seven years.	ever been given the clas	sification and/or	been denied the classi	fication
	ermanent Residency Information:	for U.S. permanent resid	ency (green card) with the U.S. Govern	ment?
☐ Yes					
•	If yes, please indicate under what category?	Employment		ersity Lottery	
•	If yes, what is the status of the application?				
•	If yes, please attach to this form a legible copy of all	USCIS notifications/rec	eipts/approval	notices	
•	If employment-based, please indicate what category (e.g.	. Outstanding, National I	nterest, PERM et	ic.)?	
•	If employment based, was the application self-petition or	employer petition?			_
Have you	I filed an I-485 Adjustment of Status application with the L	J.S. government?	☐ Yes	🗌 No	
•	If yes, do you have an Advance Parole document (Form I	I-131)?	🗌 No		
•	If yes, do you have an Employment Authorization docume	ent (EAD)?	🗌 No		
•	If yes, please provide legible copies of all USCIS noti	fications/receipts/appro	oval notices		

Section 3: Work Experience & Education:

Please provide your work experience & list in reverse chronological order (Attach separate sheet if more than 3 employment)

a.	Dates: Month/Day/Year	_ to	lonth/Day/Year	Job Title:	
	Department:			Employer:	

b. Dates: to Job Title: Month/Day/Year Month/Day/Year	
Month/Day/Year Month/Day/Year	
Department: Employer:	
c. Dates: to Job Title:	
c. Dates: to Job Title: Month/Day/Year Month/Day/Year	
Department: Employer:	
Provide Highest Level of Education (PhD, MS, etc.): Institution:	
Major/field of study on diploma/transcript:	
Section 4: Dependent Information	
Do you currently have a spouse or unmarried child (under the age of 21) in the U.S. who will require H-4 status?	
Will you be accompanied by your spouse or unmarried child (under the age of 21) who will seek H-4 status abroad?	
☐ Yes ☐ No	
• If you answer Yes to either of the 2 preceding questions, please provide the information below:	
Spouse	
Last/Family Name (*As it appears on passport) First/Given Name Middle Name	
Date of Birth: Month, Day, Year	
Currently in the U.S.?	
City of Birth Country of Birth	
Country of Citizenship Country of Permanent Residence	
Has your spouse ever been on J-1 or J-2 visa status?	
• If yes, has your spouse been recommended for and/or granted a waiver of the 2 year home residency obligation?	
☐ Yes ☐ No	
If Yes, please attach to this form a copy of the waiver recommendation and/or waiver approval.	

Child

Last/Family Name	First/Given Name	Middle Name			
Date of Birth: Month, Day, Year	🗌 Male 🗌 Female				
Currently in the U.S.?	Yes No I	f yes, current U.S. immigration status:			
City of Birth	Country of Birth				
Country of Citizenship	Country of Permanent Res	sidence			
Has your child ever been on J-1 or J-2 visa status? 🗌 Yes 🛛 No					
• If yes, has your child been recommended for and/or granted a waiver of the 2 year home residency obligation?					
🗌 Yes 🛛 No					
If Yes, please attach to this form a co	opy of the waiver recomme	ndation and/or waiver approval.			

Ch	ild

Last/Family Name	First/Given Name	Middle Name			
Date of Birth: Month, Day, Year	🗌 Male 🗌 Female				
Currently in the U.S.?	🗌 Yes 🗌 No	If yes, current U.S. immigration status:			
City of Birth	Country of Birth				
Country of Citizenship	Country of Permanent R	esidence			
Has your child ever been on J-1 or J-2 visa status? 🗌 Yes 🗌 No					
• If yes, has your child been recommended for and/or granted a waiver of the 2 year home residency obligation?					
🗌 Yes 🗌 No					
If Yes, please attach to this form a copy of the waiver recommendation and/or waiver approval.					

Child

Last/Family Name	First/Given Name	Middle Name			
Date of Birth: Month, Day, Year	🗌 Male 🗌 Female				
Currently in the U.S.?	🗌 Yes 🗌 No	If yes, current U.S. immigration status:			
City of Birth	Country of Birth				
Country of Citizenship	Country of Permanent R	esidence			
Has your child ever been on J-1 or J-2 visa status? Yes No					
• If yes, has your child been recommended for and/or granted a waiver of the 2 year home residency obligation?					
🗌 Yes 🛛 🗌 No					
If Yes, please attach to this form a copy of the waiver recommendation and/or waiver approval.					

Disclaimer: If you and/or your dependent(s), if applicable, have violated the terms of the visa(s) status then you and/or your dependent(s) may not be eligible to apply for future visa stamp(s) in a third country. You and/or your dependent(s), if applicable, must apply for all future visa stamp(s) in your/their home country.

By signing below, I hereby certify under penalty of perjury that all of the information contained in this form is true and correct to the best of my knowledge. Furthermore, I understand that if I and/or my dependent(s), if applicable, has violated the terms of a visa(s) then I and/or my dependent(s), if applicable, must apply for all future visa(s) in my home country.

Name (print)

Signature of Applicant

Date

Please return this form & supporting documents to: The Office of International Affairs 7000 Fannin Street, Suite 130 Houston, TX 77030 Email: <u>utoiahouston@uth.tmc.edu</u> Phone: (713) 500-3176 Fax: (713) 500-3189