



FOREIGN NATIONAL INFORMATION FORM (PAGE 1)

The Foreign National Form must be completed before you can receive any form of payment

All applicable questions below must be answered. A copy of both sides of your I-94 Form "Arrival and Departure Record", copy of your U.S. Visa, passport, I-20 or DS-2019, copy of social security card and TCU ID must be attached to this form.

This form must be returned before any check can be issued by the Payroll or Accounts Payable Department.

(1) Name _____
(Last) (First) (Middle)

(2) Social Security # _____ (3) TCU ID# _____

<p>(4) U.S. Local Address</p> <p>_____ (Street)</p> <p>_____ (Box #)</p> <p>_____ (City)</p> <p>_____ (State)</p> <p>_____ (Zip)</p>	<p>(5) Foreign Home Address</p> <p>_____ (Line 1)</p> <p>_____ (Line 2)</p> <p>_____ (City)</p> <p>_____ (Postal Code) (Region)</p> <p>_____ (Country)</p>
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(6) Country of Citizenship _____ (7) Country that Issued Passport _____

(8) Passport # _____ (9) Visa # _____
(Not the Control Number that begins with a year. Red One)

(10) Have you ever had another immigration status in the United States? Yes. No. (if yes, see page 2)
(11) If you are a consultant of Self-Employed Individual, do you have an office in the United States? Yes. No.
If Yes, how many days in this tax year did you/ will you have an office? _____ days.

(12) Immigration Status:

<input type="checkbox"/> F-1 Student	<input type="checkbox"/> U.S. Permanent Resident	<input type="checkbox"/> J-2 Spouse or Child of Exchange Visitor
<input type="checkbox"/> H-1 Temporary Employee	<input type="checkbox"/> OPT	<input type="checkbox"/> B-1 or B-2 Visitor for Business or Vacation
<input type="checkbox"/> J-1 Exchange Visitor	If immigration status is J-1 , what is the subtype? CHECK ONE:	
<input type="checkbox"/> Student	<input type="checkbox"/> Professor	<input type="checkbox"/> Research Scholar
<input type="checkbox"/> Short Term Scholar	<input type="checkbox"/> Other _____	
<input type="checkbox"/> Other _____		

(13) What is the actual primary activity of the visit? CHECK ONE:

<input type="checkbox"/> Studying in a Degree Program	<input type="checkbox"/> Observing	<input type="checkbox"/> Demonstrating Special Skills
<input type="checkbox"/> Studying in a Non-degree Program	<input type="checkbox"/> Consulting	<input type="checkbox"/> Clinical Activities
<input type="checkbox"/> Teaching	<input type="checkbox"/> Conducting Research	<input type="checkbox"/> Temporary Employment
<input type="checkbox"/> Lecturing	<input type="checkbox"/> Training	<input type="checkbox"/> Here with spouse

(14) What is the actual date you entered the United States? _____/_____/_____
mm dd yy (I-94)

(16) What is the starting date of your immigration status for this primary activity? _____/_____/_____
mm dd yy (Visa issue date)

(15) What is the expired date of your passport? _____/_____/_____
mm dd yy

(17) What is the projected end date of your immigration status primary activity? _____/_____/_____
mm dd yy (I-20 or DS2019)

(18) Income Providing Activity
(e.g. Student Employee, researcher)

(19) What Type Student?

<input type="checkbox"/> Undergraduate	<input type="checkbox"/> Masters
<input type="checkbox"/> Doctoral	<input type="checkbox"/> Other _____

(20) Spouse in USA?
 Yes No
Number of dependents _____

(21) Country of Tax Residence if Different from Foreign Residence
Address: _____

Did tax residency end? Yes No
If yes, when? _____/_____/_____
mm dd yy

I hereby certify that all of the above information 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 Information Form to the Payroll Department.

Signature: _____ Local Phone Number: _____ Date: _____

FOREIGN NATIONAL INFORMATION FORM (PAGE 2)

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PLEASE LIST ANY VISA IMMIGRATION ACTIVITY IN LAST THREE CALENDAR YEARS AND ALL F, J, M OR Q VISAS SINCE 1/1/85:

Date of Entry	Date of Exit	Visa Immigration Status	Primary Activity
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____
____/____/____	____/____/____	_____	<input type="checkbox"/> Student <input type="checkbox"/> Visitor <input type="checkbox"/> Other_____

I hereby certify that all of the above information 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 Information Form to the Payroll Department.

Initial & Date: _____

INSTRUCTIONS FOR THE FOREIGN NATIONAL INFORMATION FORM

Approximate time to complete this form: 10-15 minutes. If you need assistance go to the **Payroll Department, Shelli Barr-Majors** for help.

1. **Name:** List your full name.
2. **Social Security Number:** Enter your U.S. social security number issued by the U.S. Social Security Administration, not your I.D. number. Do not list numbers not assigned by the United States Social Security, i.e. Canadian social security number. All employees must have a social security number in order to work. If none, enter your ITIN issued by the IRS.
3. **TCU I.D. number.**
4. **Local Street Address:** List your local U.S. address.
5. **Residence:** List your non-U.S. address. (This is generally your foreign home address)
6. **Country of Citizenship(s).**
7. **Country that Issued Passport:** List the country in which you were issued your passport.
8. **Passport #:** Enter your passport number.
9. **Visa #:** Enter the Control Number that begins with a year in your visa.
10. **Immigration Status:** Check yes or no. If yes, complete Page 2 for the time you were present in the United States. Approximate if you don't know.
11. **Self Employment:** Check yes or no. If yes, Give the number of days you have been in the United States.
12. **Immigration Status:** Check the type of immigration status that you currently hold. Most international TCU students are here on an F-1 Student Visa. If you check U.S. Immigrant / Permanent Resident, holder of a "green card", you may skip #12-#20 and proceed to the bottom to sign and date the form.
13. **Actual Primary Activity:** Check one activity. Most TCU students are here "Studying in a Degree Program #01.
14. **Actual Entry Date into the United States:** (This date should be listed on your I-94 in your Passport.) Must include month, day, and year.
15. **Passport Expiration Date:** List the expiration date of your current passport.
16. **Start Date:** (This date is the issue date on your Visa.) Must include month, day, and year.
17. **End Date:** (This date is the completion date listed on your I-20 or DS 2019.) Must include month, day, and year.
18. **Occupation:** Describe in general the service you will perform. (Most TCU students should list "student employee".)
19. **What Type of Student:** Mark appropriate box.
20. **Spouse In USA:** Check the appropriate box. (If single or divorced, check "No") List the number of other dependents (children) with you here in the USA.
21. **Tax residence** (if different from your Foreign Home Residence.) Do not include the USA.
22. **Sign and date the form and attach the following:**
 - a. Photocopies of both sides of your I-94 Form "Arrival & Departure Record" (a small white card inside your passport).
 - b. A photocopy of your U.S. Visa, passport, I-20 or DS 2019, SSN card, and TCU ID.
23. **Send your completed Foreign National Information Form and attached photocopies to:**