

OUTSTANDING PROFESSOR/RESEARCHER DATA SHEET

(To be completed by the employing department)

ABOUT THE EMPLOYEE:

Name: _____
Last/Family *First* *Middle*

Date of birth: / / U.S. Social Security #: _____ - _____ - _____
MM *DD* *YY*

City/Town of birth: _____ State/Province of birth: _____

Country of birth: _____ Country of citizenship: _____

Home address in the U.S.: _____

(Please note that USCIS and Immigration Services must be notified within 10 days of a change of home address)

Telephone numbers: _____ (home) _____ (work)

E-mail address: _____

Most recent foreign home address: _____

Street Address

City

State/Province

Postal Code

Country

IMMIGRATION HISTORY:

Current immigration status: _____

Expiration date of current status: / /
MM *DD* *YY*

Has the individual ever been granted J-1 or J-2 status? Yes No

If yes, was the individual subject to the two-year home residence requirement?

Yes No

Has the individual ever had an immigrant petition filed on his/her behalf?

Yes No

If yes, please provide details (e.g. who filed the immigrant petition, filing date and USCIS receipt number, whether the petition was approved, denied or withdrawn, etc.)

If the individual cannot be granted permanent residence in the U.S., at what U.S. Embassy or Consulate would s/he like to apply for the immigrant visa?

City: _____ Country: _____

Note: Only in very unusual circumstances (e.g. absence of diplomatic relations, civil war) will the U.S. Department of State allow an individual to apply at a U.S. Embassy or Consulate in a country other than his/her country of birth or citizenship. Therefore, unless the individual is a Canadian citizen or permanent resident of Canada, the U.S. Consulates in Canada are not an option.

WORK HISTORY FOR PAST THREE YEARS:

1) Dates of employment: From: $\frac{\quad}{MM} / \frac{\quad}{DD} / \frac{\quad}{YY}$ To: $\frac{\quad}{MM} / \frac{\quad}{DD} / \frac{\quad}{YY}$

Employing Department: _____ Payroll Title: _____

Supervising Faculty Member (and Title): _____

Work Address: _____

Salary \$ _____ per _____

Appointment: State University of New York at Buffalo
Research Foundation of State University of New York
UB Foundation Activities, Inc.
UB Foundation Services, Inc.

2) Dates of employment: From: $\frac{\quad}{MM} / \frac{\quad}{DD} / \frac{\quad}{YY}$ To: $\frac{\quad}{MM} / \frac{\quad}{DD} / \frac{\quad}{YY}$

Title _____ Salary \$ _____ per _____

Employer's Name and Address: _____

Supervisor's Name and Title: _____

3) Dates of employment: From: $\frac{\quad}{MM} / \frac{\quad}{DD} / \frac{\quad}{YY}$ To: $\frac{\quad}{MM} / \frac{\quad}{DD} / \frac{\quad}{YY}$

Title _____ Salary \$ _____ per _____

Employer's Name and Address: _____

Supervisor's Name and Title: _____

DEPENDENTS WHO WILL APPLY FOR PERMANENT RESIDENCE:

Information for spouse and/or child/ren, if applicable. Please indicate:

Name Date of Birth Country of Birth Immigration Status Relationship
