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Plii

**H-1B Employee Information** To be completed by the current or prospective H-1B employee.

	, ,	, ,	, ,	Revised 4/1/2021
Name:				
(Exactly as in passport) Family Na	me	Given Name	Middle Name	
All Other Names Used (include price	or, unmarried name an	d names from all pre	vious marriages):	
City of Birth:		Province of Birth: _		
Social Security Number (if any):		A Number	(if any):	
Receipt number from most recent	USCIS H-1B Approval	Notice (Form I-797)	(if any):	
If you are currently in the United	States, complete the	e following:		
Date of Last Arrival: Month/Da		Form I-94 Number	: 	
Current nonimmigrant status (F-1,	<b>,</b>		Expires:	
				Month/Day/Year
Passport number:	Date Issued:		Date Expires:	
		Month/Day/Year		Month/Day/Year
Current U.S. Home Address:				
future or any extension or change of <i>information is required</i> regardless Port of Entry/Preflight Inspection Io City of Consulate:	s of whether you are c ocation at which you wi	urrently in/outside the Il apply for admission	e US (Canadian citiz into the U.S.)	
Your foreign address:				
<b>Note to new scholars coming to</b> for and be granted an H-1B visa by 10 days before the start date on th	/ a U.S. consulate (unl	ess you are a Canad	ian citizen). You ma	
Additional information required Are applications for any dependent Are you currently in removal (depo Have you ever been in H status be Have you ever been denied H stat Have you ever filed/has anyone ev If Yes, on what basis?	ts included in this appli prtation) proceedings? fore? □ No □ Yes (No us before? □ No □ ` rer filed for you an appl ed? □ No □ Yes (Wh	□ No □ Yes When? Yes (When? lication for U.S. perm Date File hen?	anent residence? d (month/year):	) ) ] No 🗖 Yes )
CERTIFICATION: I certify that th knowledge and ability.	e information I have	provided on this for	m is true and corro	ect to the best of my
Signature:		т,	oday's Date:	
		10	July 3 Dale.	