

**BRANDEIS UNIVERSITY**  
**FOREIGN NATIONAL INFORMATION FORM FOR 2009**

This form must be completed and returned to the Payroll Office before you may receive any form of payment from Brandeis University. **Please attach a copy of BOTH sides of your I-94 form "Arrival and Departure Record" (a small white card inside your passport), a copy of your U.S. visa from your passport, and I-20 or IAP66.** Failure to return this form to the Payroll Office will result in withholding of all paychecks or payments to you from our Accounts Payable Office until this form is completed and received by the Payroll Office at Bernstein-Marcus MS-110. Please call Payroll at 6-4544 if you have any questions about this form.

**Please print all information**

1. I am a Brandeis University (check one)      Faculty Member      Student      Post Doc      Consultant  
Department:

2. Last or Family Name      First      Middle  
Birth date:

3. U.S. Social Security Number      If you do not have a SSN, provide your ITIN Number  
issued by the IRS

4. U.S. Local Address  
No.      Street  
City/Town      State      Zip

5. Foreign Residence Address  
Line 1  
Line 2

Postal Code Province/Region

6. Country of Citizenship      7. Country that issued Passport

8. Passport Number      9. Visa Number  
(not the number that begins with a year)

10. Immigration Status (check one)  
U.S. Immigrant/Permanent Resident (holder of a green card) **STOP here, sign bottom of form on page 2 and return to Payroll**

J-1 Exchange Visitor (**go to #11**)

F-1 Student (**skip to #12**)

Other (please specify)

J-2 Spouse or Child of Exchange Visitor (**skip to #12**)  
(**skip to #12**)

11. If Immigration Status is J-1, what is the subtype? (check one)  
(01) Student      (02) Short Term Scholar      (05) Professor      (12) Research Scholar      Other

12. What is the actual primary purpose of the visit? (check one)  
01 Studying in a degree program      05 Observing      09 Demonstrating Special Skills  
02 Studying in a non-degree program      06 Consulting      10 Clinical Activities  
03 Teaching      07 Conducting Research      11 Temporary Employee  
04 Lecturing      08 Training      12 Here with Spouse  
99 Other, please specify

13. What is the actual date you entered the United States for this Primary Activity?  
month day year

14. What is the start date of your immigration status?  
month day year

15. What is the end date of your immigration status Primary Activity?  
month day year

