

H-1B BENEFICIARY EXTENSION REQUEST FORM

For H-1B Beneficiary Use

Office of International Students & Scholars (ISS)
Student Services Complex Rm 311, University of Nevada, Las Vegas, Phone: 895-0143, Fax: 895-0169
E-mail: issssc@cmail.nevada.edu

In order to help your department obtain H-1B status for you, please complete this form and submit it to ISS along with the supporting documents listed on checklist at the end of this form. *Type or print clearly. All questions must be answered. Write "N/A" where appropriate.*

- Extension (Continuation of previously approved H-1B employment without change)
 Amendment (Change in previously approved H-1B employment of title/duties/salary/sponsoring department)
 Extension of Concurrent Employment (Continuation of previously approved employment without change – you also have an H-1B for another employer)

Part 1. H-1B Beneficiary Biographical Information

Name (exactly as appears on passport) _____
Family/Last Name First/Given Name Middle Name

Date of Birth ____ / ____ / ____ Gender _____ Country of Birth _____
mm dd yyyy

Country of Citizenship _____ Country of Legal Permanent Residence _____
(if different from citizenship)

Marital Status _____ Social Security Number _____

Foreign Address _____

U.S. Home Address _____

Current Home Phone No. _____ Work Phone No. _____

Fax No. _____ E-mail _____

Highest Level of Education (please check one box only):

- Bachelor's Degree
 Master's Degree (for example: MA, MS, Meng, Med, MSW, MBA)
 Professional Degree (for example: MD, DDS, DVM, LLB, JD)
 Doctorate Degree (for example: PhD, EdD)

Major/Primary Field of Study _____

Part 2. Complete only if you are currently in U.S.

Initial Arrival Date in U.S. ____ / ____ / ____ Most Recent Arrival Date ____ / ____ / ____
mm dd yyyy mm dd yyyy

I-94 No. _____ Expiration Date of current H-1B status (end date on I-797) ____ / ____ / ____
mm dd yyyy

Do you have any plans to travel outside of the U.S. between now and the start date of the new H-1B petition? Yes No
If yes, please list dates of travel below. Consult with ISS before finalizing travel plans.

Part 3. H-1B Petition Information

If you will apply for a new H-1B visa outside the U.S., specify the City and Country of the U.S. Embassy/Consulate where you will apply:

Have you ever been in J-1 status? Yes No

If yes, are you or were you subject to the 2-year home residence requirement (212[e])? Yes No

If yes, have you fulfilled this requirement by obtaining a waiver or by going home for 2 years? Yes No
If you are still subject to 212[e], you are not eligible for H-1B status.

Have you been granted H-1B status during the last 7 years? Yes No If yes, please list dates and employer(s) below.
Include INS/USCIS case numbers if available. Provide copies of approval notices and I-94s.

Have you been denied H-1B status during the last 7 years? Yes No If yes, explain below.

Have you ever been granted any other H status (such as H-4 Dependent)? Yes No If yes, please explain below:

Are you in exclusion or deportation proceedings? Yes No If yes, please explain on a separate sheet.

Has a permanent residency labor certification been filed on your behalf? Yes No

Has an I-140 immigrant visa petition been filed on your behalf? Yes No If yes, please explain: _____

Have you filed an I-485 application for permanent residence with INS/U.S. Citizenship & Immigration Services? Yes No
If yes, please explain: _____

Part 4. Family Information

I do NOT have dependents (spouse/children) in the U.S.

My dependents do NOT require H-4 status (i.e., they have their own status independent of my status).

I DO have _____ dependents who require an extension of H-4 status. If dependents are currently in the U.S. and need to apply for an extension of H-4 status, please complete Form I-539 (available at <http://uscis.gov/graphics/formsfee/forms/index.htm>) and submit it to ISS with this form.

Please list any dependent family members' entry and departure dates for all trips in and out of the U.S. while holding H status for the last six years. Include name, relationship to you, and INS/USCIS case numbers if available. Provide copies of approval notices and I-94s.

I certify that the information above and documents submitted are true and correct.

Signature of Beneficiary _____ Date _____

Print Name _____

BENEFICIARY CHECKLIST – SUBMIT THE FOLLOWING REQUIRED DOCUMENTS

A. All H-1B Beneficiaries:

1. Two copies of diploma/certificate and grade transcript for highest degree AND English translation if applicable
2. Two copies of professional credential evaluation of your highest degree if it was not earned in the U.S. (contact ISS for more information)
3. Two copies of current Curriculum Vitae
4. Two copies of Certification of Translator Form (if applicable)
5. Two copies of passport identification and expiration page(s)
6. If currently in the U.S., two copies of I-94 (front & back) from official entry into the U.S.
7. If currently in the U.S., two copies of entry visa in passport

IN ADDITION, any H-1B beneficiary currently in the U.S. must submit the following:

B. If you previously held F-1 or F-2 status:

1. Two copies of all previous I-20(s)
2. Two copies of Employment Authorization Document(s) (EAD), if applicable
3. If previously in F-2 status, submit two copies of F-1's I-94 (front & back)

C. If you previously held J-1 or J-2 status:

1. Two copies of all previous IAP-66/DS-2019(s) (front & back)
2. Two copies of U.S. Dept. of State waiver letter of two-year home residence requirement (212[e]) and USCIS approval notice or receipt notice (if received), if applicable
3. If previously in J-2 status, submit two copies of J-1's I-94 (front & back)
4. Two copies of Employment Authorization Document(s) (EAD), if applicable

D. If Dependent(s) are currently in the U.S. and need to apply for an H-4 extension:

1. Completed Form I-539 (dependents' application to request an extension of stay and/or a change of status) (Form I-539 is available on USCIS website <http://uscis.gov/graphics/formsfee/forms/index.htm>)
2. Two copies of dependents' previous I-797 Approval Notice(s), if applicable
3. Two copies of dependents' I-94(s) (front & back), entry visa(s), and passport identification page(s)
4. USCIS I-539 Fee \$140 (separate check or money order in U.S. dollars payable to *U.S. Citizenship & Immigration Services*)
5. Two copies of marriage certificate AND English Translation, if applicable
6. Two copies of any previous Employment Authorization Documents (EADs)

Additional information may be requested.

CERTIFICATION OF TRANSLATOR

TO U.S. CITIZENSHIP & IMMIGRATION SERVICES:

I, _____, hereby certify that I am competent to translate from the
_____ language into English and that the attached is the accurate translation of
the original document(s).

Print Name & Title of Translator

Signature of Translator

Date Signed