Grand Valley State University FOREIGN NATIONAL INFORMATION FORM (PAGE 1)

The Foreign National Information Form MUST be completed and returned before you can receive any form of payment.

All applicable questions below must be answered. A copy of: both sides of your 1-94 Form, your US VISA from your passport, the picture page of your passport, and an 1-20 or DS2019 form must be submitted with this form.

| (1) Last or Family Name | | First | Middle | | |
|---|--|-----------------------------------|---|--|--|
| (2) Social Security # | | (3) ID #: | | | |
| (4) U.S. LOCAL ADDRESS: | | (5) FOREIGN RESIDENCE ADDRESS: | | | |
| (4) | | (5) Address line 1: | | | |
| (4) | | (5) Address line 2: | | | |
| . , _ | | | | | |
| (4) | | (5) Address line 3/City: | | | |
| (4) City: | | (5) Postal Code:Province/Region: | | | |
| (4) State:Zip Code: | (| (5) Foreign County: | | | |
| (6) Country of Citizenship: | | | | | |
| (8) Passport #: | | _(9) Visa #: | | | |
| (10) Have you ever had previous immigration | s status in the United | | atrol # that begins with a year) If yes, see page 2. | | |
| (11) IMMIGRATION STATUS: U.S. Immigrant / Permanent Alien F-1 Student J-2 Spouse or Child of Exchange Visitor J-1 Exchange Visitor H-1 Temporary Employee O-2 Personnel Accompanying O-1 Alien O-1 Alien of Extraordinary Arts Ability P-1 Int'l. Renowned Performing Group P-3 Culturally Unique Performers/Groups Other | (12) IF IMMIGRA WHAT IS TI 101 Student 105 Professor 112 Research Schol 102 Short Term S | ATIONS STATUS IS J-1, HE SUBTYPE? | (13) WHAT IS THE PRIMARY ACTIVITY OF THE VISIT? 101 Studying in a Degree Program 102 Studying in a Non-Degree Program 103 Teaching 104 Lecturing 105 Observing 106 Consulting 107 Conducting Research 108 Training 109 Demonstrating Special Skills 110 Clinical Activities 111 Temporary Employee 112 Here with Spouse | | |
| (14) WHAT IS THE START DATE OF YOUR IMMIGRATION STATUS FOR THIS PRIMARY ACTIVITY? | (15) WHAT IS THE ACTUAL DATE YOU ENTERED THE U.S.A.? Month Day Year (18) IF A STUDENT, WHAT TYPE? Undergraduate Masters | | (16) WHAT IS THE PROJECTED END DATE OF YOUR IMMIGRATION STATUS FOR THIS ACTIVITY? / | | |
| (20) FOR CONSULTANTS/SELF EMPLOYE Do you/will you have an office (fixed base) in the 1 Yes 1 No If yes, how many days in this tax y the office (fixed base?) No. of Days: | U.S.A.? ear will you have | FOREIGN RESIDENC | No. of dependents AX RESIDENCE IF DIFFERENT FROM CE ADDRESS: Yes No If yes, when?// | | |

FOREIGN NATIONAL INFORMATION FORM (PAGE 2)

The Foreign National Information Form MUST be completed and returned before you can receive any form of payment.

| Date of Entry | Date of Exit | GRATION ACTIVITY IN LAS | | | Have you taken any |
|--------------------|--------------------|-------------------------|-----------------|------------------|---------------------------|
| (Month / Day/Year) | (Month / Day/Year) | Visa Immigration Status | If J-1, Subtype | Primary Activity | Treaty Benefits? ¶Yes No |
| // | // | | | | í Yes í No |
| // | // | | | | í Yes í No |
| // | // | | | | ∫Yes ∫No |
| // | // | | | | í Yes í No |
| // | // | | | | 「Yes 「No |
| // | // | | | | ∫Yes ∫No |
| // | // | | | | ∫Yes ∫No |
| // | / | | | | í Yes í No |

| Reference information for the above table: | | | |
|--|-----------------------|-----------------------------------|---------------------------------|
| SAMPLE IMMIGRATION STATUS: | SAMPLE J-1 | PRIMARY ACTIVITIES: | |
| U.S. Immigrant / Permanent Alien | SUBTYPES: | 01 Studying in Degree Program | 07 Conducting Research |
| F-1 Student | 01 Student | 02 Studying in Non-Degree Program | 08 Training |
| H-1 Temporary Employee | 02 Short Term Scholar | 03 Teaching | 09 Demonstrating Special Skills |
| J-1 Exchange Visitor | 05 Professor | 04 Lecturing | 10 Clinical Activities |
| J-2 Spouse or Child of Exchange Visitor | 12 Research Scholar | 05 Observing | 11 Temporary Employee |
| O-1 Alien of Extraordinary Ability/Arts | | 06 Consulting | 12 Here with Spouse |
| O-2 Personnel Accompanying O-1 Alien | | | |
| P-1 Int'l Renowned Performing Group | | | |
| P-3 Culturally Unique Performers/Grp. | | | |
| | | | |

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 Tax Manager.

| Signature: | Date: |
|------------|-------|

INSTRUCTIONS FOR THE FOREIGN NATIONAL INFORMATION FORM:

- 1. Name: List full name.
- Social Security Number: Enter US social security number issued by the US Social Security Administration. Do not list numbers not assigned by US Social Security, i.e. Canadian social security numbers. If none, enter your TIN issued by IRS. If SSN not yet available, attach proof of application thereof.
- 3. ID# not necessary from visiting artists.
- 4. Local Street Address: Will ultimately be your hotel but for the college's purposes a Center for the Arts contact is best.
- 5. Residence: List your non-US address.
- 6. Country of Citizenship(s).
- Country that issued the passport. List Country in which you were issued your passport.
- 8. Passport #. Enter your Passport Number.
- 9. Enter your Visa # Not the Control # that begins with a year.
- 10.Immigration Status previous. Check Yes or No. If yes, complete table above. Approximate if you don't know.
- 11.Immigration Status: Check the type of immigration status that you currently hold. If you check US Immigrant/Permanent Resident, holder of a "green" card, you may proceed to the end of the form simply sign and date above.

- 12. Visa Immigration Status for J-1: Check the appropriate J-1 subtype.
- 13. Actual Primary Activity: Check ONE activity only.
- Start Date: MUST include month, day, year in that order.
 Approximate if you don't know.
- Actual Entry Date in the United States: MUST include month, day, year in that order. Approximate if you don't know
- End Date: MUST include month, day, year in that order. Approximate if you don't know.
- Occupation: Describe in general the service you will perform.
- 18. Student Type: If applicable, check appropriate box.
- 19. Is your spouse in the USA? Check the appropriate box. Give number of other dependents in the USA, too.
- Consultants / Self-employed Individuals: Check the appropriate box. This includes any office at any location specifically identified with you.
- 21. Tax Residence: List country where you last paid taxes as a resident. This CAN be different from your legal residence. Do NOT include the USA.

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