## O-1 REQUEST FORM - Part B: To Be Completed by Foreign National

Please DO NOT leave anything blank as information below is required for the O-1 filing. If any questions, please contact the immigration officer in International Student and Scholar Services (I3S) at (269) 387-5865.

Full Legal Name:	First Name	N	liddle Name
All Other Names Used (including maide	en name, etc.):		
Current Address:			
		State	Zip Code
Mailing Address, if different:		State	Zip Code
Foreign Address:	City	State	Zip Code
Phone: Fax: _			·
Cell phone (if available):	Country of Citizenship:		
Country of Permanent Residence ( <i>not a</i>	<i>U.S.A.</i> ):		
City, Province and Country of Birth:	Cit.	No	Country
Date of Birth:			Dr. Mr. Ms.
J.S. Social Security #:		N:	
**************************************		********	*******
B. IMMIGRATION STATUS INFORM Passport Number:		n Date:	
•	•		
	ever been filed on your behalf?		
. □ No			
☐ No ☐ Yes, explain			
No Yes, explain f already in the U.S., Current non-immigrant status:		n Date:	
Yes, explain  If already in the U.S.,  Current non-immigrant status:  * If currently working for a	Expiratio	n Date:e provide copie	es of all O-1

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INTERNATIONAL STUDENT AND SCHOLAR SERVICES (13S)
WESTERN MICHIGAN UNIVERSITY
3110 Faunce Student Services \$ KALAMAZOO, MICHIGAN 49008-5246
(269) 387-5865 \$ FAX (269) 387-5899

Dates of Stay	Place & Purpose of Sta	ay		Sta	tus He	ld
	'	•				
Inswer the following questif you answers "YFS" to a	ctions. any questions, please explain	on a senara	ate naner & attach co	nies of relev	/ant	
locuments).	arry questions, produce explain	orr a sopare	re paper a accasi co	p. 65 6. 16.6.		1
					YES	NC
	son included on this form an a awful permanent resident?	applicant fo	r an immigrant visa o	r		
Has an immigrant petitio	n ever been filed for you or ar	ny of your o	lependents?			
Have you or any accomp offense?	anying dependents ever been	arrested o	r convicted of any crir	ninal		
immigrant status? If yes	en employed in the U.S. since , give the following: name of none number, and address.			ge of non-		
Have you or any accomp Home Residency Require	anying dependents ever been ment?	subject to	the J Exchange Visito	r 2-Yr		
Have you or any accomp admission to the United S	anying dependents ever been States?	denied a v	isa, a change of statu	s, or		
	********	*****	*******	· • • • • • • • • • • • • • • • • • • •	راد ماد ماد ماد ماد	***
C. DEPENDENTS  Do you have any dependent	nts in the U.S. who need to c Yes – please complete a Foi		nd their status to O-3	?		
C. DEPENDENTS  Do you have any depende  No	Yes – please complete a Fo	rm I-539 (b	nd their status to O-3 y dependents – one f	?		
C. DEPENDENTS  Do you have any depende  No  ist family members to be	Yes – please complete a Forming included as dependents (only	rm I-539 (b	nd their status to O-3 y dependents – one f in the U.S.):	? form covers		n
C. DEPENDENTS  Do you have any depende  No	Yes – please complete a Fo	rm I-539 (b	nd their status to O-3 y dependents – one f	? form covers	all) igratio	n
C. DEPENDENTS  Do you have any depende  No  ist family members to be	Yes – please complete a Forming included as dependents (only	rm I-539 (b	nd their status to O-3 y dependents – one f in the U.S.):	? form covers	all) igratio	n
C. DEPENDENTS  Do you have any depende  No  ist family members to be	Yes – please complete a Forming included as dependents (only	rm I-539 (b	nd their status to O-3 y dependents – one f in the U.S.):	? form covers	all) igratio	n
C. DEPENDENTS  Do you have any depende  No  ist family members to be	Yes – please complete a Forming included as dependents (only	rm I-539 (b	nd their status to O-3 y dependents – one f in the U.S.):	? form covers	all) igratio	n
C. DEPENDENTS  Do you have any depende  No  ist family members to be	Yes – please complete a Forming included as dependents (only	rm I-539 (b	nd their status to O-3 y dependents – one f in the U.S.):	? form covers	all) igratio	n
C. DEPENDENTS  Do you have any depende  No  List family members to be  Family Name	Yes – please complete a Formincluded as dependents (only Given Name	rm I-539 (b	nd their status to O-3 y dependents – one f in the U.S.): Relationship	? form covers Imm State	all) igratio us	
C. DEPENDENTS  Do you have any depende  No  Select the manner in whice	Yes – please complete a Formincluded as dependents (only Given Name	rm I-539 (by if already) Age  *********** status:	nd their status to O-3 y dependents – one f in the U.S.): Relationship	? form covers Imm State	all) igratious *****	

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## **E. PRIOR O-1 STATUS**

Has anyone ever petitioned for O-1 status for you?  No Yes, please explain	
Have you ever been denied O-1 status? ☐ No ☐ Yes, please explain	
Have you ever held O status?  No Yes, please explain	
**************************************	*****************
As further evidence of my professional accomplishments, I a evidence to be submitted to establish your outstanding ability	nm including the following documentation (please listry. Please do not list each individual publication):
1.	
2.	
3	
4.	
5.	
6.	
7.	
<u>8.</u>	
<u>9.</u>	
10.	

(CONTINUED)

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	ing this statement, I,, agree to the conditions and statemen	its
isted b	I declare under penalty of perjury that the information provided is true and accurate. I understand that to knowingly furnish false information in the preparation of these forms and any supplement thereto or to aid abe counsel another to do so is a federal offense punishable by a fine or imprisonment up to five years, or both.	t or
•	The application for O-1 and the signature of any WMU employee, and any other statement made by a WMU employee in his/her official WMU capacity for the purpose of supporting the application shall not be utilized for purpose other than applying for the immigration status $I$ am seeking now.	any
•	I understand that endorsement of the O-1 application and/or accompanying letters by any WMU employee shal be construed to be a promise of or commitment for continued employment, or commitment or guarantees or support regarding tenure or merit increases.	l not
•	I understand that the petition shall not in any way affect my employment status with the University relative to a the provisions set forth in the AAUP collective bargaining agreement (if represented by AAUP).	all
•	I understand that the petition shall not in any way affect my employment status with the University relative to a the provisions set forth in University procedures and policies, and other applicable communications with me regarding my employment. The University continues to reserve all rights in this regard.	all
•	I understand that University must deal with the reality of certain deadlines imposed by its Schedule of Classes. Whether and when approval of my O-1 petition is obtained is something that is not within the control of the University. The University must deliver its classes and services. If my current immigration (visa) status expires before a ruling is made on my O-1 petition, and I have not produced a valid work authorization to continue or begin working for the University, the University would have no choice but to terminate my employment at the t my appropriate employment authorization expires.	
•	I agree that I need to provide proof of authorization to work in the United States before I can be hired into or continue in the position that was offered to me.	
•	It is my responsibility to promptly provide the immigration officer in International Student and Scholar Services (I3S), Human Resources, and my department with copies of any and all correspondence or documentation I ha receive from the Department of Homeland Security and its bureaus in regard to my application.	ve
•	I will immediately inform the immigration officer if there are any changes in the terms and conditions of the WN O-1 employment.	⁄lU′s
•	I will immediately inform the immigration officer if I decide to leave my O-1 position (advance notice is required	i).
•	I will consult with the immigration officer prior to leaving the U.S. for any reason as immigration regulations charged frequently.	ange
•	I understand that the Department of Homeland Security (DHS) requires that I inform the DHS of address or nat change using Form AR-11 or AR-11SR within 10 days from moving/changing. I also understand that I must also provide a copy of Form AR-11 or AR-11SR to immigration officer after mailing the original form to the DHS.	
•	I will immediately inform the immigration officer by contacting (269) 387-5865 if there are any changes to the	

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE RETURN THIS APPLICATION FORM TO THE ADMINISTRATIVE CONTACT PERSON IN THE WMU HIRING DEPARTMENT ALONG WITH REQUIRED SUPPORTING DOCUMENTS AS OUTLINED IN THE 0-1 CHECKLIST.

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information given above.