VERIFICATION OF VISA FOR HR SYSTEM (NON-PAYMENT STATUS)

VISITOR INFORMATION

Name: _____
(Last) (First) (Middle)

Address: _____

_____

Department: _____ Date of Birth**:** _____

Admission #:_____SSN:_____

Visa Type: _____ Country of Citizenship: _____

Have you been to the U.S.A. before? _____Yes _____No

If **Yes**, please list the dates and visa types:

1. Date entered the U.S.A_____ Date left the U.S.A_____ Visa type_____
2. Date entered the U.S.A_____ Date left the U.S.A_____ Visa type_____
3. Date entered the U.S.A_____ Date left the U.S.A_____ Visa type_____

AUTHORIZATION (To be completed and signed by Office of International Students & Scholars)

Document Title: _____

Issuing Authority: _____

Document #:_____

Expiration Date (if any):_____

Document #:_____

Expiration Date (if any):_____

Signature: _____Date:_____

Name & Title: _____