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Human Resources Immigration Services

1971 University Blvd. Lynchburg, VA 24502

(434) 592-7330

**H-1B PACKET**

**H-1B PACKET**

**THIS PACKET CONTAINS THE FOLLOWING FORMS:**

* LU DEPARTMENT REQUEST FOR H-1B PETITION - CHECKLIST ………………………………... 2
* LU DEPARTMENT REQUEST FOR H-1B PETITION ………………………………………………… 3
* LU DEPARTMENT – H-1B AND LABOR CONDITION ATTESTATION …………………………… 4
* ACTUAL WAGE DETERMINATION ……………………………………………………….………..… 5
* HR SERVICE REQUEST SHEET (H-1B) …………………………………………………….……......... 6
* EMPLOYEE INFORMATION – H-1B CHECKLIST ………………………………………...…………. 7
* EMPLOYEE INFORMATION (H-1B) ……………………………………………………………...……. 8
* EMPLOYEE INFORMATION (H-1B) …………………………………………………………………… 9
* EMPLOYEE FAMILY CHECKLIST & INFORMATION (H-4) ………………………………….….... 10

***The Department is responsible for completing Pages 2 - 6 and providing the required supporting documents. The Employee is responsible for completing Pages 7 - 10 and providing the relevant supporting documents.***

***Answer all questions, even is the answer is ‘N/A’ or ‘None’.***

***Incomplete H-1B packets will be returned to the department for full completion and will not be considered as received until they are fully complete. Thank you for your cooperation in ensuring that the H-1B filing process goes smoothly, by completing the forms in full and providing all documents requested.***

*Glossary of Abbreviations*:

DHS – Department of Homeland Security

DOL – Department of Labor

USCIS – United States Citizenship & Immigration Services (a bureau of DHS)

HR – Human Resources

*Glossary of Abbreviations*:

DHS – Department of Homeland Security

DOL – Department of Labor

USCIS – United States Citizenship & Immigration Services (a bureau of DHS)

HR-CIS – HR Compliance & Immigration Services (a division of LU Human Resources)

**LU DEPARTMENT REQUEST FOR H-1B PETITION – CHECKLIST**

**PLEASE – NO STAPLES, WE HAVE TO REMOVE THEM AND IT ONLY SLOWS US DOWN**

* **LU CAN FILE AN H-1B PETITION UP TO SIX MONTHS BEFORE THE REQUESTED START DATE. PLAN AHEAD!!**

Please ensure that all of the following documents are included. If the H-1B packet is not complete with all of the required documents attached, it will be returned to the department for proper completion. To avoid delays, please ensure all requested documents are provided. **Please complete this packet electronically and print it for signature and submission to HR. Pages 4, 5, 6 and 9 require signatures.**

ONLY **ONE PHOTOCOPY** OF EACH DOCUMENT, UNLESS OTHERWISE INDICATED, IS REQUIRED. PLEASE DO NOT SEND MORE THAN ONE CLEAR PHOTOCOPY.

* LU Department Request for H-1B petition with all questions answered
* Employment Contract or offer letter (if applicable)
* Actual Wage determination
* HR Service Request completed in full and signed
* Employee Questionnaire with employee documents (from Employee Checklist)
* Employee Family Form with Employee Family documents (from employee Family Checklist)
* Personal Checks for Employee or Employee family filing fees (if self-pay)

**Note:**  in assessing the salary, we must deduct any amount the employee pays towards the USCIS filing fees associated with the H-1B petition (except premium processing fees). The difference is the actual wage paid to the employee. If that amount is lower than the prevailing wage, we cannot file the H-1B petition.

**The entire H-1B packet, when completed and signed by the Department’s VP, must be forwarded to HR. If you have any questions about the Forms or the Checklist, please contact**:

**Immigration Specialist**

**HR Immigration Services**

**1971 University Blvd., Lynchburg, VA**

[**dvinersar@liberty.edu**](mailto:dvinersar@liberty.edu)

**(434) 592-7330**

**Internal Use Only (Do Not Write Below This Line):**

|  |  |  |
| --- | --- | --- |
| * H-1B New | * H-1B Portability | * H-1B Extension |
| * H-1B Concurrent |  |  |
| * Packet Complete | * Packet Incomplete | * Premium Processing |
| * Travel Hold | * Driver License Expiring | * Imminent travel Plans |
| * Start Date |  | * Processing Consulate:   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

# LU DEPARTMENT REQUEST FOR H-1B PETITION

***PLEASE – NO STAPLES, WE HAVE TO REMOVE THEM AND IT ONLY SLOWS US DOWN*!**

If you need further assistance please contact dvinersar@liberty.edu or call (434) 592-7330.

PLEASE CHECK ALL THAT APPLY:

|  |  |  |
| --- | --- | --- |
| \_\_ New H-1B Request | \_\_ H-1B Extension Request | \_\_ Premium Processing Request |

\_\_ Employee’s state drivers license/learners permit will expire in less than 30 days (please provide copy of license)

\_\_ Employee Traveling Abroad Shortly - Date of Travel:

|  |  |
| --- | --- |
| Employee Name:  (Last, First, Middle) |  |
| LU Department: |  |
| Department Contact:  (name, phone & e-mail) |  |
| Country of Citizenship: |  |
| Country of Birth: |  |
| Highest Academic Degree: |  |
| Work Site Address: |  |
| Desired H-1B Employment Start Date & End Date:  (mm/dd/yyyy – mm/dd/yyyy) – (*Please ensure that any start date is the day after the current status end date – duration is usually three years)* |  |

Description of Duties:

**LU DEPARTMENT – H-1B AND LABOR CONDITION ATTESTATION**

The Immigration Act of 1990 requires the submission of a Labor Condition Application (LCA) to the Department of Labor (DOL) before submitting the H-1B petition to the USCIS. Before USCIS can submit the LCA, the department must certify the following statements and complete the required information.

HR is then responsible for record-keeping in accordance with Department of Homeland Security and Department of Labor regulations. A Labor Certification Application (LCA) must be filed with the Department of Labor for each H-1B petition and a public access file must be maintained which will contain at least the certified LCA, the Actual Wage Determination (on page 5) and the prevailing wage determination. HR will use the information provided in the Actual Wage Determination to determine the prevailing wage for the position using the DOL’s Online Wage Library. Departments can access this information at the Foreign Labor Certification Data Center (www.flcdatacenter.com). Per bullet 2 below, the employee must receive at least the actual wage for the position or the prevailing wage, **whichever is higher.** Liberty University will not be able to sponsor an employee for H-1B status whose salary does not meet the required wage standards.

Date of Birth

Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (mm/dd/yyyy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The School/Department of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ certifies that:

1. The School/Department wishes to sponsor the above-referenced individual for H-1B status as described in this packet.
2. The salary being paid to the above named individual is at least the **actual wage** being paid to all other individuals with similar experience and qualifications for the specific employment in question.
3. The Prevailing Wage must be met for the appropriate wage level **each year**.
4. The enclosed **Actual Wage Determination** is true and accurate.
5. The fringe benefits offered to this employee are equivalent to that offered to other US workers similarly employed.
6. Employing this person will not adversely affect the working conditions of US workers similarly employed.
7. The School/Department understands that the certified LCA will be posted by HR on University property for 10 (ten) business days.
8. The School/Department agrees to comply fully with the terms of the LCA stated above for the duration of the alien’s employment in H-1B status at Liberty University.
9. The School/Department fully understands that any willful violation connected with providing inaccurate information in the LCA or the Actual Wage Determination may incur a severe penalty from the DOL or DHS which will have a long-range impact on the entire University body.
10. As required by the USCIS, the School/Department agrees to pay the reasonable cost of return transportation to the foreign national’s home country if s/he is dismissed or terminated before the end of the authorized period of H-1B employment.

Certified by:

Name Signature Date

 Direct Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department Chair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

VP/Provost: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

VP of HR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

# ACTUAL WAGE DETERMINATION

Please be sure to provide only the **MINIMUM** requirements to perform the duties of the position. Note that the minimum requirements for the position are not the same as the applicant’s qualifications as the applicant may have additional experience or qualifications. \*\*Please write the employee’s **full name** and **date of birth** on the *reverse* of this page.

LU Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Salary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The employee/applicant will receive normal fringe benefits \_\_\_ Yes \_\_\_ No – Explanation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position is full-time \_\_\_ Yes \_\_\_ No - Hours per week: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Minimum Education required (degree & Field of Study): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Minimum Years of Experience Required: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Minimum Years of Training Required: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Special Minimum Requirements: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We estimate that individuals in this position normally earn a salary between $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| The following attributes were considered in determining the salary for this specific individual: | \_\_ New employee’s EDUCATION  \_\_ New employee’s WORK EXPERIENCE  \_\_ New employee’s SPECIFIC JOB DUTIES & FUNCTION  \_\_ New employee’s SPECIALIZED KNOWLEDGE |

All checked factors were carefully and thoughtfully considered. The ‘Actual Wage Determination’ is not simply the average wage of other similarly situated employees. Instead it is a determination of what the salary should be based on the checked factors. Any factor not considered was irrelevant to a salary determination.

Number of Employees with same Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Employees with similar experience & Qualifications: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee ID, Employment Addresses & Salaries of employees with similar job title, experience and qualifications (if none write ‘NONE’):

|  |  |  |
| --- | --- | --- |
| Employee ID Number | Employment Address (city, state) | Employee Salary |
|  |  |  |
|  |  |  |
|  |  |  |

We certify that the above information is true and accurate to the best of our knowledge.

Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name & Title Signature Date

Department Chair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name & Title Signature Date

# SERVICE REQUEST SHEET (H-1B)

*Complete the information below and return with the completed application packet*

***ONLY PUT ON THE FEES THAT WILL BE CHARGED TO THE LU DEPT. DO NOT INCLUDE FEES PAID BY PERSONAL CHECK***

|  |  |
| --- | --- |
| Employee Name: |  |
| LU Department: |  |
| LU Dept. Contact Name & Phone Number: |  |
| HR - Processing Fee: | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| HR - Expedited Service Fee (req. if Premium Processing Selected): | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| USCIS Filing Fee(s): | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| USCIS Anti-Fraud Fee: | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| USCIS I-539 Fee (For H-4 Dependents) | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| USCIS Premium Processing Fee: | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| TOTAL FEES DUE: | $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name & Title Signature Date

Department Chair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name & Title Signature Date

**H-1B FEES**

|  |  |  |  |
| --- | --- | --- | --- |
| ***SERVICE*** | ***USCIS FILING FEE(S)*** | ***HR PROCESSING FEE*** | ***TOTAL FEE(S)*** |
| H-1B (New), including  Fraud Fee for All H-1B New Filings | $320.00  $500.00 | $650.00 | $1470.00 |
| H-1B Extension | $320.00 | $650.00 | $970.00 |
| USCIS Premium Processing Fee | $1000.00 | None | $1000.00 |
| I-539 Fee (H-4 Filing) – Self-completed | $300.00 | $50.00 | $350.00 |
| HR Expedited Service Fee | $0.00 | $500.00 | $500.00 |

*Internal Use Only:  
  
Checks Requested: $ \_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_ $ \_\_\_\_\_\_\_\_\_\_*

# EMPLOYEE INFORMATION – H-1B CHECKLIST

CHECKLIST:

***PLEASE – NO STAPLES, WE HAVE TO REMOVE THEM AND IT ONLY SLOWS US DOWN!!***

Please ensure that all of the following documents are included. If the H-1B packet is not complete with all of the required documents attached, it will be returned to the department for proper completion. To avoid delays, please ensure all requested documents are provided.

ONLY **ONE PHOTOCOPY** OF EACH DOCUMENT, UNLESS OTHERWISE INDICATED, IS REQUIRED. PLEASE DO NOT SEND MORE THAN ONE PHOTOCOPY AND MAKE SURE THAT THE COPY IS CLEAR.

**All new H-1B filings and H-1B extension filings must include the following documents**:

* Employee Information (H-1B) Form (pages 8, 9) with all questions answered
* Last degree received (PhD/Masters/Baccalaureate) and transcripts (if your most recent diploma does not relate directly to your duties at LU, please contact HR)
* Certified English translation of diploma and transcripts (if applicable)
* Academic credential evaluation, for non US degree (see list of academic evaluators, below) – only for last degree received (if applicable)
* Passport biographical data page
* Passport page showing passport expiration date
* US non-immigrant visa (if physically present in USA)
* I-94 card, front and back
* All Forms I-797 documenting USCIS approval of previous applications or petitions relating to your status in the U.S.
* Evidence of any immigrant visa petition or labor certification application of which you are a beneficiary (if applicable)
* Evidence of any application to adjust to permanent resident status (if applicable)

**All new H-1B filings for persons already in H-1B Status Transferring to LU (H-1B Portability),** also include:

* The last 6 months of pay statements from your current H-1B employer

**If you currently have a J-1 or J-2 visa/status, and this is your first H-1B filing**, also include:

* Copy of I-612 approval notice showing §212(e) waiver
* Copy of all IAP-66, DS-2019 documents

**If you currently have an F-1 or F-2 visa/status, and this is your first H-1B filing**, also include:

* Copy of all I-20 documents
* Copy of EAD (Optional Practical Training - OPT) card

Academic Degree Credentialing Companies:

Morningside Evaluations ([www.mside.com](http://www.mside.com))  
  
Foundation for Int’l Services ([www.fls-web.com](http://www.fls-web.com))  
  
Silvergate evaluations, Inc ([www.silvergateevaluations.com](http://www.silvergateevaluations.com))  
  
World Education Services (WES) ([www.wes.com](http://www.wes.com))  
  
Evaluation services, Inc ([www.evaluationservice.net](http://www.evaluationservice.net))

# EMPLOYEE INFORMATION (H-1B)

***PLEASE – NO STAPLES, WE HAVE TO REMOVE THEM AND IT ONLY SLOWS US DOWN!!***

Please answer all questions completely. If the answer to a question is NONE or NOT APPLICABLE, please state ‘None’ or ‘N/A’. Do not leave any blanks. Uncompleted forms, or forms without all required documents will be returned to you for completion. To avoid delays, please answer every question. **Please complete the form electronically, print, sign and return to your school or department.**

Note: If you are requesting a change of status while in the USA, you cannot leave the US while the H-1B petition is pending. Generally, if you leave the USA before the H-1B petition is approved, you cannot return until the H-1B petition is approved and you are issued an H-1B visa from a US Consulate. Premium Processing may be required. If you are requesting an Extension of H-1B status, you can leave the USA while the application is pending but you may have to obtain an H-1B visa from a US Consulate. Please speak with CIS prior to traveling.

* If you are traveling outside the USA please check this box and provide your planned dates and destination(s) of travel:   
    
  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* If you need to renew your VA driver’s license in less than 30 days, please indicate the date of expiration:   
    
  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Family name (all capital letters) First Name Middle Name

(SPELL YOUR NAME EXACTLY AS IT APPEARS IN YOUR PASSPORT)

All Other Names Used: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LU Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country of Citizenship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/Province of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Security No.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

‘A’ Number (if any): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Passport Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Passport Issue Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Passport Expiration date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Last Arrival in USA   
(mm/dd/yyyy): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Current Visa Status: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Foreign Address (REQUIRED): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Consulate abroad where you would

make any future visa application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMPLOYEE INFORMATION (H-1B) CONTINUED:**

Answer the following questions with a Yes or No. If the answer is Yes, please provide details as requested.

In the past 6 years, have you ever held H-1B status?

(If yes, give the dates of H-1B status in a mm/dd/yyyy - mm/dd/yyyy format) - If you changed status in the U.S., your first date of H-1B status in the starting validity date of the first H-1B petition for you. If you applied for an H-1B visa abroad before first coming to the U.S., in H-1B status, your first date of H-1B status is your first date of entry into the U.S.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been denied H-1B status?

* No
* Yes - provide detail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please check if you have been the beneficiary of any of the following applications and provide a copy of the USCIS or Department of Labor receipt:**

* Permanent Labor Certification Application (e.g. PERM)
* Immigrant Petition for Alien Work (i.e. I-140)
* Immigrant Petition for Alien Relative (i.e. I-130)

**Please check if you have filed any of the following applications and provide documentation:**

* Application to Adjust to Permanent Resident Status (i.e. I-485)
* Immigrant visa application

Are you currently in exclusion or deportation proceedings?:

\_\_ No \_\_ Yes - provide detail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are dependent family members changing to H-4 status or extending H-4 status?

\_\_ No \_\_ Yes

Are you currently in exclusion or deportation proceedings?

* No
* Yes – provide detail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are dependent family members changing to H-4 status or extending H-4 status?

YES NO

\_\_ No \_\_ Yes

(If yes, family member (s) must review the Employee Family Checklist & Information Form 4 the documents requested)

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

# EMPLOYEE FAMILY CHECKLIST & INFORMATION (H-4)

***PLEASE – NO STAPLES, WE HAVE TO REMOVE THEM AND IT ONLY SLOWS US DOWN!!***

**USCIS Form I-539 must be completed for all H-4 filings if the family member is in the USA. Form I-539 can be found at www.uscis.gov**.

Liberty University (LU) **does not** provide legal representation for the employee’s family members and will file the Form I-539 as a courtesy only. HR provides the following checklist to assist the employee family in gathering the documents required by USCIS only. All correspondence related to the Form I-539 filing will be sent by USCIS directly to the applicants. HR will complete the I-539 form for a fee of $50.00; however, completing the form does not constitute a legal relationship. Form I-539 completion assistance is done by appointment only.

The employee’s oldest family member must complete Form I-539.  **DO NOT complete a separate I-539 for each family member; only one form need be completed. If there is more than one family member the Supplemental Form to I-539 must be completed to include those family members**. The employee does not complete the Form I-539 unless it is being completed on behalf of children under the age of 14. The form MUST be signed at Part 5 and the employee can sign only on behalf of children under the age of 14. Please read the form instructions carefully. Please ensure that all of the following documents are included with Form I-539.

If the Employee Family H-4 Packet is not complete with all of the required documents attached, it will be returned to the employee’s family for proper completion. The H-1B petition will be filed without the H-4 filing and the family may have to file the application without further assistance from Liberty University. To avoid this, and to avoid delays, please ensure all requested documents are provided.

The Form I-539 can be found at www.uscis.gov. It will also be provided by e-mail, (in a fillable format) upon request. Please e-mail your request to dvinersar@liberty.edu. **The USCIS filing fee is $300.00 for the entire family**. Please ensure that you provide a **check payable to the ‘USCIS’** or ‘**US Citizenship & Immigration Services**” in the amount of $300.00.

ONLY **ONE PHOTOCOPY** OF EACH DOCUMENT, UNLESS OTHERWISE INDICATED, IS REQUIRED. PLEASE DO NOT SEND MORE THAN ONE PHOTOCOPY AND MAKE SURE THAT THE COPY IS CLEAR. THANK YOU

* Original, completed I-539 form, signed at Part 5
* Marriage certificate with certified English translation
* Birth certificates of all children, with certified English translation
* Passport biographical data page for each family member
* Passport page showing passport expiration date
* Current US non-immigrant visa for each family member
* I-94 card, front and back, for each family member
* All prior Forms I-797 documenting the approval of applications to change to or extend status (if any)
* Copy of I-612 approval notice showing §212(e) waiver
* Copies of all IAP-66, DS-2019 documents or I-20 documents

**REMEMBER, COMPLETE ONLY IF THE FAMILY MEMBER(S) IS IN THE USA;**

**IF YOUR FAMILY MEMBERS ARE OUT OF THE USA, THEY MUST OBTAIN AN H-4 VISA FROM A US CONSULATE AND THEY DO NOT COMPLETE THE I-539 FORM**