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

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** Document Title: Issuing Authority: Expiration Date (if any):_____ Document #:_____ Expiration Date (if any):_____ Signature: ______Date: _____ Name & Title:

VISITOR INFORMATION