2150 SHATTUCK A V E N U E – SUITE 500 B E R K E L E Y, C A 94720–2321



## **Permanent Residency Initial Information - Tenure-Track Faculty Positions**

		oloma(s) & Transcript(s) fer Letter (from Vice Provost for Faculty cases)		
		o requirements		
Advertisements (teaching posit		1B approval notices (if applicable)		
All other USCIS approvals (if ap			or Forms DS-2019 and J visa stamps (if applicable)	
		PENDENT(s): H-4/Other USCIS approval notices (if applicable)		
	loyee and/or Spouse if applicable)			
Employee Last Name:		Employee First Name:	Title:	
			□Mr. □Ms. □Dr.	
Employee Email address:		Employee work phone number: Employee Cell phone number:		
Employee Residential address:		Employee Country of Birth:	Employee Country of Citizenship:	
Current non-immigrant status	Current Status Expiration Date:	First date in H-1B status (if	Number of Days out of US since first	
		applicable)	date in H1B (if applicable):	
	Click or tap to enter a date.			
Expiration Date of Most Recent	Has employee or family ever held J	Is there any personal information that may influence this PR application, e.g.		
Visa Stamp in Passport (Unless Canadian):	status?	marriage to a U.S. Citizen/Permanent Resident/someone in the PR process?		
	Yes	Yes Please specify:		
	No	No		
Human Resources/Academic	Human Resources/Academic	Human Resources/Academic Personnel Contact email		
Personnel Contact Name	Personnel Contact phone			
Supervisor Name	Supervisor Contact email	Supervisor Contact phone		
Who will cover the legal and Does the employee have any family		Who will cover the legal and filing f	ees for the adjustment of status	
filing fee of the adjustment of members who will be included in		applications for the family member(s)?		
status application for the	the permanent residency process?	Department will pay for AOS fees for the family members		
employee?	Yes	Employee will pay for AOS fees for the family members		
Department will pay	□No	Not applicable (no family members applying)		
Employee will pay				
Hosting Department name	Is the position permanent?	Is the position full time?	Date of initial offer of employment	
	Yes	Yes		
	No	No		
Start date at UC Berkeley	Current job title	Starting salary in current position		
		Current salary		
List ALL work location(s): Street Address, City, County or Parish:		,		
Click or tap here to enter text.		Is telecommuting an option for this	s position? 🗆 Yes 🗆 No	

Spouse, if any:				
Last Name:	First Name:	Title:		
Click or tap here to enter text.	Click or tap here to enter text.	□Mr. □Ms. □Dr.		
Country of Birth: Click or tap here to enter text.	Country of Citizenship: Click or tap here to enter text.	Current Non-Immigrant Status: Click or tap here to enter text.		
		Expiration Date: Click or tap to enter a date.		
Children, if any:	· · · · ·			
Name, Date of Birth, Country of Citizer Click or tap here to enter text.	iship, Current Nonimmigrant Status, Expiration	Date:		

## **Tenure-Track Faculty Positions**

"In submitting this form I agree to provide the documents and support letter(s) that are required for the University to file for labor certification/permanent resident status for the international employee identified above. In addition, we have reviewed and understand that we will bear the cost of all fees associated with this application which the employer is required to cover." Information about fees can be found at http://internationaloffice.berkeley.edu/ucb\_departments/permanent\_residents/fees

Department Chair:	Signature:	Date (mm/dd/yyyy):