Request to Initiate H-1B Petition

Administrative Support Information

▶ Provide contact information for the person who will assist with processing the H-1B petition:

Name		
Email	Phone _	
Department	Department Chair _	

▶ Email the completed form to the International Employment Coordinator at internationalemployment@uta.edu.

Immigration Information for Foreign Employee

The H-1B Petitio	n for the	non-imn	nigrant v	vill be file	d with the USCIS	as an:	Extension	Transfer	New Petition
Name									
Email					Home Cou	ntry			
Current Status:	t Status: J1/J2 F1/F2 H-1B Other Current Status End Date								
If applicable, giv	e all date	es of H-1E	3 previou	isly grante	ed:				
Proposed E	mployi	ment l	nform	ation					
Job Title					Specific A	nnual S	alary (not a ran	ge)	
Detailed Job Des	scription								
Minimum Degre	e Require	ed and Fi	eld of Stu	udy					
Years of Experie	nce Need	ed		_	Number of Em	ployees	Supervised (n	ot students) _	
Other Special Re	quiremer	nts							
Will the employe	ee repres	ent UTA (off-camp	us, or visi	t other Universiti	es?	Yes; Percent o	of time	No
Explanation									

Supervisor Name	Supervisor Title			
Supervisor Email	Supervisor Phone			
Physical Address of Primary Place of Employment (Department or Off-Campus)				
Physical Address of Secondary Place of Employment (if applicable)				

► H-1B Dates of Employment need to start immediately after the expiration of the current immigration status and for at least 1 year and preferably for 3 years because of the time and complexity required to complete the process. Contact the International Employment Coordinator at internationalemployment@uta.edu for more information.

Preferred Start Date of H-1B Employment _____

Preferred End Date_____

Certification

▶ Read carefully before signing. These attestations are subject to the Department of Labor and USCIS audit.

Please begin the H-1B Petition process.

I understand the salary offered must meet or exceed the prevailing wage set forth by the Department of Labor and be higher than the lowest actual wage paid to all employees in the department with this job title and with similar qualifications and experience.

I also understand that the Department is required to guarantee the return airfare for the alien if he/she is dismissed before the completion of the authorized employment.

I understand that the International Employment Coordinator relies on the information provided by my department in processing the H-1B petition and that my department has an affirmative obligation to notify the International Employment Coordinator should any information related to promotion, work location, salary, job duties, and/or title change at any time before or after the H-1B has been adjudicated.

I understand that by signing this document, I certify that it is in the best interest of the Department I represent and The University of Texas at Arlington to proceed with an H-1B Petition for the above-mentioned non-immigrant.

Department Chair	
Signature	Date
Dean	
Signature	Date