Instructions

This form is used to notify the International Student and Scholar Services (ISSS) of the initial appointment or intent to renew the H-1B status of a continuing international faculty member (i.e. a person who is not a United States citizen or Green Card holder). The department must complete this form in its entirety; the ISSS will prepare the H-1B application for this individual.

Personal Information

Last Name:	First Name:
Highest Degree Earned:	Other:
Country of Citizenship:	Country of Permanent Residence:
Current Phone Number:	
Current Email Address:	
Previous Immigration Status Is the individual currently in the U.S.? □Yes □No	If yes, what is their immigration status?
Appointment Information	
e e	mber's Field of Specialization:
Dates of Appointment:From To	

(In setting the start date of the appointment, if appointment is not sixmonths before next semester start date, I-129 has to be "Premium Processed".

Departmental Chair

Name of Person Preparing Form:______ Email address:______ Phone:______ Office Address:______

Date:

Please scan or fax a copy to Toyin Awoderu: ayenio@ccsu.edu or 860-832-2047.