

New Non-immigrant Hire Questionnaire

Please print or type required information and return to the Office for International Services. This form should be completed for all full-time instructional staff. If you need additional space, please attach a separate sheet of paper.

	Surname or family name	Giv	en or first name	Middle name	
Gender	Male Female				
Email a	ddress:	Phon	e number:		
Fordha	m department/school where you wi	ll be employed and your	position:		
Date ar	nd place of birth Month/day/yea	211			
	Month/day/yea	ar City	State or province	Country	
Country	y of citizenship	Cou	ntry of legal permanent resi	dence	
lease lis	st your all visits to the U.S. within the	NO e past ten years, including	g your current visit (if applica	ble). If not applicable, please v	vrite "n/a
Please lis	st your all visits to the U.S. within the			ble). If not applicable, please v	write "n/a
Please lis		e past ten years, including			vrite "n/a
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Please lis		e past ten years, including			vrite "n/a
-	Visa Type	e past ten years, including			vrite "n/a
-		e past ten years, including			vrite "n/a
9a. If	Visa Type	e past ten years, including Fro your OPT end?	m		vrite "n/a
9a. If O. If you	Visa Type you are an F-1 on OPT, when does we indicated that you are/were in J st indicate the J category (e.g. stude)	your OPT end? ratus, please complete the	me following:	To	vrite "n/a
9a. If	Visa Type you are an F-1 on OPT, when does you are does you are an I st	your OPT end? atus, please complete the ont, research scholar, provear home residency required.	me following: fessor): uirement? Yes No	To	vrite "n/a

Please send the completed form to the Office for International Services at:
441 E. Fordham Road, Bldg 540, Bronx, NY 10458, Email: oisjscholar@fordham.edu, or Fax: 718-817-5573