

O-1 REQUEST FORM - Part A: To Be Completed by WMU Hiring Department

A. CONTACT INFORMATION

Hiring Department: _____ Division/College: _____

Address: _____

Administrative Contact Person: _____

Phone: _____ Fax: _____ E-mail: _____

B. POSITION INFORMATION

Name of Foreign National: _____
Last name First name Middle name

Position Title: _____ **WIN (if any):** _____

Location of Position: On Campus Off Campus, explain _____

General Description of Job/Project: _____

List 6 or more of the most important duties the foreign national will perform in priority order:

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____

The position is: Full time Salary offered _____ # of hours per week _____
 Part time Hourly rate offered _____ **AND** Annual salary offered _____
of hours per week _____

Does compensation package include fringe benefits? Yes, value of benefits \$ _____ No

INTERNATIONAL STUDENT AND SCHOLAR SERVICES (I3S)
WESTERN MICHIGAN UNIVERSITY
3110 FAUNCE STUDENT SERVICES ♦ KALAMAZOO, MICHIGAN 49008-5246
(269) 387-5865 ♦ FAX (269) 387-5899

Expected duration of employment (as appears on the offer letter): from ____/____/____ to ____/____/____

C. EMPLOYEE’S CURRENT STATUS

- New Employment (includes current employee in another non-immigrant status)
- Extension without any changes
- Change to Western Michigan as employer (prospective WMU employee already in O-1 status elsewhere)
- Add WMU as additional employer (prospective WMU employee in already in O-1 status with another employer and wishes to work concurrently)

D. DECLARATION OF THE EMPLOYING DEPARTMENT

The department will comply with the following regulations during the O-1 application process and during the employment of the above named foreign national under the terms of O-1 status.

1. The department will notify the immigration officer in International Student and Scholar Services (I3S) if the terms of the employment change during the validity period of this O-1 petition so an amended petition can be filed with the U.S. Citizenship and Immigration Services.
2. The beneficiary of this application is one of the small percentages of individuals who has risen to the top of their field of endeavor and fulfills the requirements of an individual of extraordinary ability in the sciences, arts, education, business, or athletics. It is the department’s intention to employ this individual in the capacity and at the salary described above.
3. The department will notify the immigration officer in I3S prior to termination or resignation of the O-1 employee as I3S must notify appropriate government agencies to avoid any penalties.
4. I declare under penalty of perjury that the information provided is true and accurate. I understand that to knowingly furnish false information in the preparation of these forms and any supplement thereto, or to aid abet or counsel another to do so is a federal offense. The department will immediately inform the immigration officer in I3S by contacting (269) 387-5865 if there are any changes to the information given above.

Supervisor’s name: _____ Signature: _____ Date: _____

Department Chair’s name: _____ Signature: _____ Date: _____

College Dean’s name: _____ Signature: _____ Date: _____

Provost or Vice President’s name: _____ Signature: _____

Date: _____

INTERNATIONAL STUDENT AND SCHOLAR SERVICES (I3S)
WESTERN MICHIGAN UNIVERSITY
3110 FAUNCE STUDENT SERVICES ♦ KALAMAZOO, MICHIGAN 49008-5246
(269) 387-5865 ♦ FAX (269) 387-5899