

(mention which applies)

DATE FIFTH YEAR OF H STATUS EXPIRES _____

(Should you wish to extend your H status beyond 6-year limit, your PERM (Labor Certification) needs to be filed before your 5th year of H status ends.)

Current Visa Status: _____ **Expiration Date:** _____

A # (if any): _____ Admission # (I-94): _____

Social Security Number (if any): _____

Name of Present Employer: _____
(please enter full legal name of the organization)

Address of Employer: _____

Phone: _____ **Fax:** _____ **Email:** _____

Job Title at present job: _____
(as per the documents filed with the USCIS – LCA for H-1B visas and Form I-129 for L-1 visas)

If married, spouse's country of birth: _____

Part B
Alien's Education Information

***Note:** Kindly fill-in the following starting from highest level of education. Please use additional sheet if required. List all education, including diploma(s), training(s), certificate courses, or the equivalent.

Name and address of Colleges, Schools and Universities attended (Please include Full Address, City, State or province, Country, & postal code)	Major Field of Study	From (MM/DD/YYYY)	To (MM/DD/YYYY)	Degree Received (Master, Bachelor, etc)

Vocational or Training Institutions Attended

Name and address of Institution <i>(Please include Full Address, City, State or province, Country, & postal code)</i>	Major Field of Study	From (MM/DD/YYYY)	To (MM/DD/YYYY)	Diploma or Certificate Received

Part C
Alien's Work Experience

***Note:** Please fill-in the following in descending order, starting from current employer and going back to the first employer. Please use separate sheet if necessary. **Please do not mention the names of the client sites – only the names of the employers.**

1) Name of Employer: _____

Address of Employer: _____

Nature of Employer's business:

Job Title: _____

Date Started:

Month Day Year

Date Left: _____

Month Day Year

Name and Phone Number of the Employer's Supervisor:

Number of Hours worked (per week): _____

Brief Job Description *(Please ALSO provide a letter from the employer OR sworn and notarized affidavit from co-worker mentioning the dates of employment, job title, hours worked, and detailed job description. Format will be provided, if required):*

2) Name of Employer: _____

Address of Employer:

Nature of Employer's business: _____

Job Title: _____

Date Started: _____

Month Day Year

Date Left: _____

Month Day Year

Name and Phone Number of the Employer's Supervisor:

Number of Hours worked (per week): _____

Brief Job Description (*Please ALSO provide a letter from the employer OR sworn and notarized affidavit from co-worker mentioning the dates of employment, job title, hours worked, and detailed job description. Format will be provided, if required:*)

3) Name of Employer: _____

Address of Employer: _____

Nature of Employer's business: _____

Job Title: _____

Date Started:

Month Day Year

Date Left:

Month Day Year

Name and Phone Number of the Employer's Supervisor:

Number of Hours worked (per week): _____

Brief Job Description (*Please ALSO provide a letter from the employer OR sworn and notarized affidavit from co-worker mentioning the dates of employment, job title, hours worked, and detailed job description. Format will be provided, if required:*)

4) Name of Employer: _____

Address of Employer: _____

Nature of Employer's business: _____

Job Title: _____

Date Started:

Month Day Year

Date Left: _____

Month Day Year

Name and Phone Number of the Employer's Supervisor:

Number of Hours worked (per week): _____

Brief Job Description (*Please ALSO provide a letter from the employer OR sworn and notarized affidavit from co-worker mentioning the dates of employment, job title, hours worked, and detailed job description. Format will be provided, if required:*)

5) Name of Employer: _____

Address of Employer: _____

Nature of Employer's business: _____

Job Title: _____

Date Started: _____

Month Day Year

Date Left: _____

Month Day Year

Name and Phone Number of the Employer's Supervisor:

Number of Hours worked (per week): _____

Brief Job Description (*Please ALSO provide a letter from the employer OR sworn and notarized affidavit from co-worker mentioning the dates of employment, job title, hours worked, and detailed job description. Format will be provided, if required*):

6) Name of Employer: _____

Address of Employer: _____

Nature of Employer's business: _____

Job Title: _____

Date Started: _____

Month Day Year

Date Left: _____

Month Day Year

Name and Phone Number of the Employer's Supervisor: _____

Number of Hours worked (per week): _____

Brief Job Description (Please ALSO provide a letter from the employer OR sworn and notarized affidavit from co-worker mentioning the dates of employment, job title, hours worked, and detailed job description. Format will be provided, if required):

7) Name of Employer: _____

Address of Employer: _____

Nature of Employer's business: _____

Job Title: _____

Date Started: _____
Month Day Year

Date Left: _____
Month Day Year

Name and Phone Number of the Employer's Supervisor:

Number of Hours worked (per week): _____

Brief Job Description (*Please ALSO provide a letter from the employer OR sworn and notarized affidavit from co-worker mentioning the dates of employment, job title, hours worked, and detailed job description. Format will be provided, if required*):

8) Name of Employer: _____

Address of Employer: _____

Nature of Employer's business: _____

Job Title: _____

Date Started: _____
Month Day Year

Date Left: _____
Month Day Year

Name and Phone Number of the Employer's Supervisor:

Number of Hours worked (per week): _____

Brief Job Description (*Please ALSO provide a letter from the employer OR sworn and notarized affidavit from co-worker mentioning the dates of employment, job title, hours worked, and detailed job description. Format will be provided, if required*):

Part D
Documents Required

- Copy of updated **Resume**;
- Copies of **all educational credentials**, including degree certificates, transcripts/marksheets, and any training certificates;
- Copy of **evaluation** of educational credentials, if any;
- Copies of **Experience Letters/Employment Confirmation Letters** from **all** previous employers. The letters must be printed on the company's letterhead. The letters should include details of the job duties performed, the skills utilized, start and end dates of employment, and position(s) held and must be duly signed and dated by an authorized representative of the company;
- Clear **copy** of **passport** (all pages except blank ones); current I-94;
- Copies of **all** current and previous **I-797 approvals issued by the USCIS on behalf of the applicant**. (*include all documentation relating to an authorized stay in the United States, including B-1/B-2 status, F-1/F-2 status, L-1/L-2 status, etc., if applicable*).

<https://www.h1btransfersusa.com>

- IF any immigrant petition has ever been filed on your behalf, please provide: a copy of I-140 approval notice (if still pending, provide receipt notice), a copy of the labor certificate used for your I-140 filing, and experience letters you have submitted along with the petition.

- END OF QUESTIONNAIRE -

SAMPLE EMPLOYEE PERM APPLICATION QUESTIONNAIRE