



**INFORMATION REGARDING THE FOREIGN NATIONAL**

- 1. Date of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
Country of Citizenship: \_\_\_\_\_ Country of Permanent Residence: \_\_\_\_\_
- 2. Married \_\_\_\_\_ Widowed \_\_\_\_\_ Single \_\_\_\_\_ Divorced \_\_\_\_\_ (mark all that apply, now and in past)  
If presently married, spouse's name: \_\_\_\_\_  
Family Name First Name Middle Name  
Spouse's Country of Birth: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_  
Number of Children: \_\_\_\_\_  
For **All** children: Name Birthdate Birthplace  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 3. Any parent or grandparent of scholar **or** spouse a U.S. citizen? \_\_\_\_\_
- 4. Is scholar currently in the U.S.? (Y/N) \_\_\_\_\_ If "yes", what is her/his current visa status? \_\_\_\_\_  
When did this status first begin? \_\_\_\_\_ Expiration date of current status: \_\_\_\_\_  
Will s/he travel outside the U.S. between now and the decision on this application: (Y/N) \_\_\_\_\_  
**If "yes", please notify SISS immediately of ALL travel plans.**
- 5. Are spouse/children of scholar currently in the U.S.? (Y/N) \_\_\_\_\_ If "yes", what is their current visa status? \_\_\_\_\_  
When did this status first begin for each? \_\_\_\_\_ Expiration date of current status for each: \_\_\_\_\_  
Will they travel outside the U.S. between now and the decision on this application: (Y/N) \_\_\_\_\_
- 6. Scholar's current work address: \_\_\_\_\_  
Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ Email address: \_\_\_\_\_
- 7. Current home address: \_\_\_\_\_  
Home Phone #: \_\_\_\_\_
- 8. Has scholar or any dependents ever been out of legal status in the U.S.? (Y/N) \_\_\_\_\_  
Has scholar or any dependents ever engaged in unauthorized employment in the U.S.? (Y/N) \_\_\_\_\_  
Has scholar or any dependents ever had any contact with police here or abroad? (Y/N) \_\_\_\_\_  
Has scholar or any dependents ever had any immigration-related problems in the U.S. or at an embassy abroad? (Y/N) \_\_\_\_\_  
If the answer to any of the above questions is "yes", please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 9. If the foreign national or dependent is now, or has ever been, in the U.S. in J-1 status, attach legible copies of all his/her DS-2019s . If copies are unavailable, ask the individual to contact the J-1 program sponsor for copies.
- 10. Has a labor certification or immigrant visa petition ever been filed on behalf of the foreign national? (Y/N) If "yes", please explain" \_\_\_\_\_  
\_\_\_\_\_
- 11. Does the scholar have more than three years teaching/research experience after completion of the highest degree? (Y/N) \_\_\_\_\_
- 12. Please indicate if there is any documentation or evidence in the following categories regarding the individual (check all that apply):  
\_\_\_\_\_  
\_\_\_\_\_ Receipt of major internationally recognized prizes or awards for outstanding achievement in the academic field;  
\_\_\_\_\_  
\_\_\_\_\_ Membership in associations in the academic field that require outstanding achievements of their members;  
\_\_\_\_\_  
\_\_\_\_\_ Published material in professional publications written by others about the scholar's work in the academic field  
(should be **more than footnoted references** without evaluation and can include a number of entries in a citation index  
citing the scholar's work as authoritative);  
\_\_\_\_\_  
\_\_\_\_\_ Participation on a panel, or individually, as a judge of the work others in the same or an allied academic field;  
(includes participation as a reviewer for a peer-reviewed scholarly journal, reviewer of grants, etc.)  
\_\_\_\_\_  
\_\_\_\_\_ Original scientific or scholarly research contributions to the academic field; and  
\_\_\_\_\_  
\_\_\_\_\_ Authorship of scholarly books to articles (in peer reviewed, internationally-circulated journals).

13. Please provide the following documents with this request:
- \_\_\_\_\_ A copy of the scholar's appointment letter;
  - \_\_\_\_\_ A copy of the scholar's updated CV;
  - \_\_\_\_\_ A copy of the job announcement (if you have already recruited).
  - \_\_\_\_\_ A statement explaining why the position is appropriate for UCD sponsorship (as explained above). This statement should be presented to the Dean for review prior to signing below.

***\*\*SISS will then be in touch with the department contact to schedule a meeting to discuss how to proceed\*\****

### DEPARTMENT AUTHORIZATIONS

The Department certifies the following:

1. The Department and the foreign scholar intend that the scholar will remain indefinitely in the UCD position according to the above guidelines.
2. The Department will assemble the required documentation, communicate with SISS and the scholar, and follow through to completion of the permanent residence process as instructed by SISS.
3. The Department agrees to pay any expenses associated with this application, including filing fees, mail expenses, attorney fees, etc., in addition to the SISS service recharge fee of \$2500. Please complete recharge approval form (Form D) to be submitted with this request.

Supervisor/PI: \_\_\_\_\_

Name	Signature	Phone #	Date
_____	_____	_____	_____

Dept. Chair: \_\_\_\_\_

Name	Signature	Phone #	Date
_____	_____	_____	_____

Dept. Contact: \_\_\_\_\_

Name	Email	Phone #	Fax #
_____	_____	_____	_____

### DEAN AUTHORIZATION

**Academic Departments (if pursuing permanent residency for a non-tenure track academic position):**

Approved by: \_\_\_\_\_

**Dean**

**UCD School of Medicine/UCDMC (for all permanent residency cases):**

Approved by: \_\_\_\_\_

**Dean**

# RECHARGE FEES FOR SERVICES FOR INTERNATIONAL SCHOLARS – Form D

SISS service fees will be recharged to the academic department or program which hosts and/or hires the international faculty member or researcher. This fee can only be paid on a department recharge basis and cannot be paid directly by the scholar. Reimbursement for this recharge may be available through your college dean's office. Contact that office if you have questions about applying for reimbursement.

Please note that this recharge does not include any filing fees payable to U.S. Citizenship and Immigration Services for processing of applications.

Please return this Scholar Recharge Approval Form with the completed department request form or application materials to Services for International Students and Scholars (SISS), UCD campus. Questions about recharges should be addressed to Lori Zimmerman ([lmzimmerman@ucdavis.edu](mailto:lmzimmerman@ucdavis.edu)) or 530-752-7876.

**University of California, Davis**  
**Scholar Recharge Approval**  
*Effective July 1, 2006*

Scholar name: \_\_\_\_\_  
Last/Family Name(s)
First/Given Name(s)

Administrative Contact info: \_\_\_\_\_  
Name
Phone
E-mail

Department: \_\_\_\_\_ College or Division: \_\_\_\_\_

Recharge to DaFIS acct/sub acct number: \*      \*      
COA
DaFIS account number
Sub account number

Please check one:

- |                          |  |            |
|--------------------------|--|------------|
| <input type="checkbox"/> | J-1 Exchange Visitor (Request for DS-2019).....              | \$325.00   |
| <input type="checkbox"/> | J-1 Exchange Visitor (Request for extension of DS-2019)..... | \$325.00   |
| <input type="checkbox"/> | TN (Canadians).....  | \$325.00   |
| <input type="checkbox"/> | TN (Mexicans).....   | \$1,000.00 |
| <input type="checkbox"/> | H-1B Petition.....   | \$1,000.00 |
| <input type="checkbox"/> | H-1B Extension Petition.....                                 | \$1,000.00 |
| <input type="checkbox"/> | O-1 Petition*.....   | \$1,000.00 |
| <input type="checkbox"/> | Permanent Residence Petition.....                            | \$2,500.00 |

\*There is no charge for O-1 extensions.

**Note:** A change in job offer may require a new visa document/petition and an additional recharge.

**SIGNATURE AUTHORIZATION:** I authorize this departmental recharge for SISS to support the employment of the above-named international scholar.

Dept.  
Chair

Signature

Date

---