



FOREIGN NATIONAL INFORMATION FORM (PAGE 1)

The Foreign National Information Form must be completed before you can receive any form of payment.

All applicable questions below must be answered. A copy of both sides of your I-94 Form ("Arrival and Departure Record", a small white card inside your passport), copy of your U.S. VISA and picture/expiration page from your passport, and I-20 or DS-2019 or I-797A must be attached to this form. This form must be returned before any check can be issued by the University.

(A) Last or Family Name: _____ First: _____ Middle: _____

(B) Social Security # or Taxpayer ID#: _____ Red ID#: _____ Date Of Birth: _____

(C) U. S. LOCAL STREET ADDRESS: _____

City: _____

State: _____ Zip: _____

U.S.A

(D) FOREIGN RESIDENCE ADDRESS: _____

City: _____

Province/Region: _____ Postal Code: _____

Foreign Country: _____

(E) Home phone _____ Work phone _____ Email: _____

(1) Date of Arrival at SDSU (mm/dd/yy) ____/____/____

Current VISA Type (circle one):

F1 F2 J2
J1-student

If J1-non-student, enter type: J1-_____
If not listed above, enter type: Other _____

(2) Date of very first entry into the U.S. (mm/dd/yy) ____/____/____

Original VISA Type (circle one):

F1 F2 J2
J1-student

**If you have more than one entry into the U.S., please complete the exit/entry dates section at the end of this form (Page 2).

If J1-non-student, enter type: J1-_____
If not listed above, enter type: Other _____

(3) Are you a transfer student from another U.S. university? [] Yes [] No Date of transfer _____

(4) End date of your current immigration status primary activity (from your I-20 or DS-2019 or other INS document) _____

(5) Have you applied for Permanent Residency? [] Yes [] No

(6) Have you ever had an F2 or J2 visa? [] Yes [] No

(7) Country where you lived immediately before coming to the U.S. _____

(8) Country That Issued Passport _____

(9) Country of Citizenship (if different from country that issued passport) _____

(10) Passport #: _____ Exp. Date (mm/dd/yy) ____/____/____

(11) Are you [] single [] married-- Is your spouse living in the US?: [] Yes [] No; Is your spouse working in the U.S.? [] Yes [] No

(12) Number of dependents (children): _____ (total)

(13) Of total dependents, how many are: in US _____ U.S. citizens or residents _____

(14) Estimated annual income from SDSU (this calendar year Jan-Dec) _____

(15) If you're a student, what type? (circle one): undergraduate graduate post-graduate post-doctoral

(16) Who is paying you?

Department _____

Job Title/description for payment _____

(e.g., Student Assistant, Graduate Assistant, Teaching Assistant, Professor, Guest Lecturer, Scholarship, etc)



FOREIGN NATIONAL INFORMATION FORM (PAGE 2)

(17)Have you claimed a tax treaty withholding exemption this calendar year? Yes No

FOR USE BY EMPLOYEES ONLY (Payments through PAYROLL):

(18)Are you employed by... (Check all that apply):
SDSU (State of California)? v Yes
the SDSU Research Foundation? Yes Associated Students? Yes
Aztec Shops? Yes Outside SDSU? Yes

FOR USE BY HONORARIUM /GUEST LECTURER PAYMENT/INDEPENDENT CONTRACTOR RECIPIENTS ONLY:

All Honorarium recipients with B-1, B-2, WB or WT status (and Mexicans or Canadians without an I-94) must answer these questions:

(19)Will you be at the University for longer than 9 days? Yes No

(20)Have you received any payments from more than 5 universities in the last 6 months? Yes No

If the answer is "yes" to either question above, the payee cannot receive an honorarium.

(21)Is the activity to be performed in a normal academic activity? Yes No

FOR USE BY SCHOLARSHIP OR FELLOWSHIP RECIPIENTS ONLY:

(22) Do you pay NonResident Tuition? Yes No

(23) Do you pay required Health Insurance from your own funds? Yes No (my health insurance is paid for by scholarship, waiver, or other)

(24) Do you get any of the following in addition to your scholarship(s)...

Check all that apply:

Registration Fee Waiver? Yes Tuition Waiver? Yes -> Maximum (if any) # of units waived _____
Books loaned? Yes # of Units enrolled this academic: year Fall _____ Spring _____ Summer _____

(25)Please complete this section if you have had more than one entry into the U.S. or more than one visa type:
Also note with an * if you commuted from Mexico/Canada on a day by day basis rather than residing in the U.S. during any time period.

Table with 3 columns: Date of Entry (mm/dd/yy), Date of Exit (mm/dd/yy), Visa type (circle one for each entry). Rows include visa types F1, F2, J2, J1-student, J1-non-student, and Other.

(26) IF YOU CHOOSE NOT TO TAKE ADVANTAGE OF A TREATY BENEFIT YOU MIGHT OTHERWISE QUALIFY FOR, PLEASE CHECK HERE .

Under penalties of perjury, I certify that all of the information on this form is true and correct to the best of my knowledge. I understand that if my status changes, I must notify the payroll office immediately.

I, _____, authorize SDSU to change my federal tax withholding status to the appropriate method according to the relevant tax law, especially if I take advantage of a Tax Treaty benefit, once the Treaty benefit expires.

Signature _____ Date _____