

## H-1B Instructions and Application Packet (Initial and Extension)

### H-1B Overview

H-1B Specialty Workers are authorized to work in specialized fields for a maximum period of six years. The University of South Alabama



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## PROSPECTIVE H-1B EMPLOYEE PROCEDURES

1. Provide immigration information and history (please complete Appendix C): The Office of Immigration or department's point of contact will communicate with the prospective H-1B worker to obtain the supporting documents noted on page 13 of 13.

2. H-4 Dependent Sponsorship. If a prospective H-1B employee has dependent family members (spouse or children) they would like sponsored for H-4 visa status in connection with their H-1B petition, the foreign national should contact the Office of Immigration at (251) 466-0050.

## H-1B Packet Appendix A: Position & Wage Info

### PART 1: PROSPECTIVE EMPLOYEE/DEPARTMENT INFORMATION – TO BE COMPLETED BY DEPT

1. Prospective H-1B employee name: \_\_\_\_\_  
Surrname (Last) Given Name (First) Middle Name (if any)
2. Prospective H-1B employee's email address: \_\_\_\_\_
3. Degree(s) which the prospective H-1B employee holds \_\_\_\_\_
4. Hiring Department/Unit: \_\_\_\_\_
5. School/ Division: \_\_\_\_\_
6. Contact Person: \_\_\_\_\_
7. Email: \_\_\_\_\_
8. Telephone: \_\_\_\_\_
9. Fax: \_\_\_\_\_

**PART 2: CONTINUED**

8. Absolute MINIMUM qualifications required to perform the duties/tasks of this position:

a. Level of higher education required  Bachelor's  Master's  Doctorate  Other \_\_\_\_\_

b. State license or certificate required  Yes or  No If yes, what license or certificate is required for this job?  
\_\_\_\_\_

c. Degree major(s)/specialty required: \_\_\_\_\_

d. Absolute minimum number of years of employment experience required for the position: \_\_\_\_\_

e. Other minimum requirements, if any: \_\_\_\_\_

f. Position's minimum required training and experience (other than that which would or could have been obtained during the normal course of the degree program listed above) please quantify required training and experience in number of months/years (if none, please write none): \_\_\_\_\_

9. MINIMUM number of employees (not including students or grad assistants) this worker must supervise \_\_\_\_\_

10. Is travel required?  Yes-or-  No If yes, what is the expected travel percentage? \_\_\_\_\_

11. Are there any other workinierer oii825.2 (o)ers(t)-9.2 t(m)8erriher(m)ii or o(m)iy?







Office of Immigration  
Meisler Hall 220 • 390 Student Center Circle  
Mobile, AL 36688-0002  
Phone: 251.466050  
E-mail: [immigration@southalabama.edu](mailto:immigration@southalabama.edu)



## H-1B PACKET APPENDIX C: EMPLOYEE'S INFORMATION

### PART 1: H-1B APPLICANT DEMOGRAPHIC INFORMATION

**NAME AND RESIDENCE INFORMATION:**

Full Name (as in passport) \_\_\_\_\_  

 \_\_\_\_\_ Family Name (Surname)      \_\_\_\_\_ Given Name (First)      \_\_\_\_\_ Middle Name (if any)

All other names used: \_\_\_\_\_  
 (Include maiden name and names from all previous marriages)

Place of Birth (required) \_\_\_\_\_ : \_\_\_\_\_ : \_\_\_\_\_  

 \_\_\_\_\_ City                      \_\_\_\_\_ Province/ Territory                      \_\_\_\_\_ Country

Citizenship & Residence (required) \_\_\_\_\_ : \_\_\_\_\_  

 \_\_\_\_\_ Country of Citizenship                      \_\_\_\_\_ Country of Permanent Residence

Date of Birth (Month/Day/Year) \_\_\_\_\_ Gender  Male  Female

**CONTACT INFORMATION:**

Current Address: \_\_\_\_\_  
 \_\_\_\_\_  
 E-mail address \_\_\_\_\_ Phone Number: \_\_\_\_\_

**UNIVERSITY OF SOUTH ALABAMA POSITION INFORMATION:**

(Please provide contact information for your intended employer at University of South Alabama)

USA Academic Department: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

### PART 2: FOR APPLICANTS CURRENTLY IN THE UNITED STATES ONLY

Current Nonimmigrant Status: \_\_\_\_\_ Date Current Status Expires (m/dd/yyyy): \_\_\_\_\_

If you are in H1B Status with an employer other than USA, are you currently employed?  YES or  NO

Employer's Name and Address: \_\_\_\_\_

