

University of South Alabama  
Postdoctoral Fellow Appointment Form

Appointment Action:  New  End  Extend  Other Revision: \_\_\_\_\_  
(e.g., change of Mentor/Department)

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Postdoctoral Fellow Information

Name: \_\_\_\_\_  
(Last, First, Middle)

J Number: \_\_\_\_\_

Local Address: \_\_\_\_\_  
\_\_\_\_\_

Campus Email: \_\_\_\_\_  
Other Email: \_\_\_\_\_

Residency Status:

US Citizen  
 Permanent Resident  
USCIS Number: \_\_\_\_\_  
 Visa Holder Type: \_\_\_\_\_  
Expiration: \_\_\_\_\_  
USCIS/I-94 Number: \_\_\_\_\_

Gender:  Male  Female

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Mentor Information

Name: \_\_\_\_\_

College/Institute: \_\_\_\_\_

Department: \_\_\_\_\_ Department Address: \_\_\_\_\_

Telephone: \_\_\_\_\_  
\_\_\_\_\_

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