

PART B: TO BE COMPLETED BY THE FOREIGN NATIONAL

PERSONAL INFORMATION			
Full Legal Name: _____ <div style="display: flex; justify-content: space-between; font-size: small; margin-top: -10px;"> Last/Family Name First Name Middle Name </div>			
City, State/Province & Country of Birth: _____ <div style="display: flex; justify-content: space-between; font-size: small; margin-top: -10px;"> City State/Province Country </div>			
Country of Citizenship:			
Country of Permanent Residents <i>(not USA)</i> :			
Date of Birth <i>(month/day/year)</i> :	Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male		
U.S. Social Security Number:	Alien Registration Number:		
Banner/WSU ID:			
Do you hold a valid passport? <input type="checkbox"/> Yes <input type="checkbox"/> No	Passport Number:		
Passport Issue Date:	Passport Expiration Date:		
CURRENT ADDRESS			
Street			
City:	State/Province:		
Postal Code:	Country:		
Email:	Phone:	Fax:	
FOREIGN ADDRESS			
Street:			
City:	State/Province:		
Postal Code:	Country:		
IMMIGRATION STATUS INFORMATION			
Has a petition for permanent residency ever been filed on your behalf? <input type="checkbox"/> No <input type="checkbox"/> Yes, explain:			
If already in the U.S.,			
Current non-immigrant Status:	Expiration Date:		
Current I-94 Number:	Entry Date:		
Status upon entry into the U.S.			
<i>If currently working for another employer as an O-1, please provide copies of all O-1 approval notices.</i>			
DEPENDENTS			
Do you have any dependents in the U.S. who will need to change/extend their status to O-3? <input type="checkbox"/> No <input type="checkbox"/> Yes – please complete a Form I-539 (by dependents)			

O 1 PROCESSING

Select the manner in which you plan to obtain your O-1 status:

- At U.S. embassy/consulate located at (City, Country):
- Change of status to O-1 from another classification
- O-1 extension

PRIOR O 1 STATUS

Has anyone ever petitioned for O-1 status for you?

- No
- Yes, please explain:

Have you ever been denied O-1 status?

- No
- Yes, please explain:

Have you ever held O status?

- No
- Yes, please explain:

LIST ALL PREVIOUS STAYS IN THE U.S. AND THE STATUS HELD (B 1, B 2, F 1, J 1, H 1B, H 4, ETC.)

Dates of Stay	Place & Purpose of Stay	Status Held

FAMILY MEMBERS TO BE INCLUDED AS DEPENDENTS (ONLY IF ALREADY IN THE U.S.)

Family Name	Given Name	Age	Relationship	Status Held

ANSWER THE FOLLOWING QUESTIONS

If you answer YES to any questions, please explain on a separate paper and attach copies of relevant documents.

	YES	NO
Are you or any other person included on this form, an applicant for an immigrant visa or adjustment of status to lawful permanent resident?	<input type="checkbox"/>	<input type="checkbox"/>
Has an immigrant petition ever been filed for you or any of your dependents?	<input type="checkbox"/>	<input type="checkbox"/>
Have you or any accompanying dependents even beer arrested or convicted of any criminal offense?	<input type="checkbox"/>	<input type="checkbox"/>
Have any dependents been employed in the U.S. since last admitted or granted a change of non-immigrant status? If yes, give the following: name of employer, department, name of immediate supervisor, phone number, and address:	<input type="checkbox"/>	<input type="checkbox"/>

ANSWER THE FOLLOWING QUESTIONS (CONTINUED)

If you answer YES to any questions, please explain on a separate paper and attach copies of relevant documents.

	YES	NO
Have you or any accompanying dependents ever been subject to the J Exchange Visitor 2-Yr Home Residency Requirement?	<input type="checkbox"/>	<input type="checkbox"/>
Have you or any accompanying dependents ever been denied a visa, a change of status, or admission to the United States?	<input type="checkbox"/>	<input type="checkbox"/>

EVIDENCE OF EXTRAORDINARY ABILITY

As further evidence of my professional accomplishments, I am including the following documentation (please list evidence to be submitted to establish your outstanding ability. Please do not list each individual publication):

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.

I certify that to the best of my knowledge, the information provided in Part B of this request form is accurate.

In addition, copies of documents submitted are exact copies of unaltered documents, and I understand that I may be required to submit original documents to an immigration or consular official at a later date.

Signature of O-1 applicant: _____ Date: _____

PLEASE RETURN THIS FORM TO THE ADMINISTRATIVE CONTACT PERSON IN THE WSU EMPLOYING DEPARTMENT ALONG WITH REQUIRED SUPPORTING DOCUMENTS AS OUTLINED IN THE MEMO WHICH ACCOMPANIED THIS FORM FROM THE OFFICE OF INTERNATIONAL STUDENTS AND SCHOLARS.