

## H-1B Worksheet

## A. Beneficiary Information

Family Name ( <i>Last Name</i> )	Given Name (First Name)			Full Middle Name		
ranniy Name (Lust Nume) Given Name (Fin			mej		ruii iviidule ivallie	
All Other Names Used (include alic	ıses, maid	en name and names fi	rom all previous mo	arriages)	Gender	
			1 (:6		(:5)	
E-mail Address		U.S. Social Security N	umber ( <i>if any</i> )	A-Numb	per (if any)	
Date of Birth (mm/dd/yyyy)	Country of	Birth	Province of Birth		Country of Citizenship	
If in the United States, complete the	e following	g: (Note: You can retrie	eve your current I-9	94 <u>here</u> )		
Date of Last Arrival (mm/dd/yyyy)	I-94 N	umber		Current Nor	nimmigrant Status	
Date Status Expires (mm/dd/yyyy)	SEVIS	Number ( <i>if any</i> )		EAD Numbe	er (if any)	
Passport Number		Date Passport Issued	(mm/dd/yyyy)	Date Pas	sport Expires (mm/dd/yyyy)	
Current U.S. Address (if applicable	)					
Home Phone Number			Mahila Dhana Nu	mhar		
nome Phone Number			Mobile Phone Number			
If currently outside the United State petition is approved:	es or will b	e at the time of an ap		S. consulate	you want notified if the new	
Consulate Address (City)			Foreign Country			
Your Foreign Address						
B. Academic Credentials. List all earned or anticipated college and/or university degrees.						
Type of Degree (e.g., PhD, MS, BS)	Field	of Study (e.g., Comput	ter Science)			
School Name			City, Country Date Completed (mm/dd/yy)			
Type of Degree	Field	of Study				
School Name			City, Country		Date Completed (mm/dd/yyyy)	
Type of Degree	Field	of Study				
School Name			City, Country		Date Completed (mm/dd/yyyy)	



C.	H-1B History – The H-1B visa is valid only for six years unless you have an approved I-140. Below please list each H-1B
	approval you have received (starting with your initial H-1B approval) along with the valid to and from dates list on the I-
	797 H-1B approval.

Initial/Amend/Extend	Valid From (mm/dd/yyyy)	Valid To (mm/dd/yyyy)	Receipt Number
(Example) Initial	(Example) 1/1/2018	(Example) 12/31/2020	(Example) WAC123456789

D.	Travel Information - If you intend on travelling internationally within the next 6 months please provide an approximation of the contract of t	nate departure
	and return date. Please note international travel while your petition is pending with USCIS is not advised.	

Departure	Return				

**E. Immigration History.** List <u>any U.S.</u> visa status you have held and exact dates you have ever entered and departed the U.S. Please start from the beginning and work your way down to the present. (*Provide attachment if necessary.*)

Visa Status	Valid From (mm/dd/yyyy)	Valid To (mm/dd/yyyy)	Date Entered U.S.	Date Departed U.S

## F. Green Card Information

Has your current employer, or any former employer, ever filed a PERM (Form 9089) application for you?						
Has your current employer, or any former employer, ever filed an I-140 application for you?						
I-140 Receipt Number	Priority Date	EB Preference Category				



**G. Dependent Information.** If you are married and/or have unmarried, dependent children under the age of 21, who are currently inside the U.S., who need visa sponsorship for H-4 status, please provide the following information:

Family Name (Last Name)		Given Name (First Name) Full Middle Nam		ull Middle Name	e		Relation to Beneficiary		
Current U.S. Address (if different from your own)									
		-							
Foreign Address (if differen	t from	your own	)						
D   (D: II / ////	1		6 , 14					5	
Date of Birth (mm/dd/yyyy)	)		Country W	here Passpo	ort	Issued	Expir	ation D	ate ( <i>mm/dd/yyyy</i> )
Country of Dirth	Count	tny of Citi-	ronchin	II C Cocial	50	scurity Number (if	~~\	A Num	nber ( <i>if any</i> )
Country of Birth	Couri	try of Citiz	zensnip	U.S. 30Clai	36	curity Number ( <i>if</i> o	лпуј	A-Null	ibei (ij uriy)
Date of Last Arrival (mm/do	d/vvvv)	I-94 Nu	ımber			Current Nonimm	igrant	Status	Expires on (mm/dd/yyyy)
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E-mail Address					Da	ytime Phone Num	ber		
Family Name (Last Name)		Given Na	me ( <i>First Na</i>	ıme)	F	full Middle Name			Relation to Beneficiary
Data of Dinth / ware /dd / vu u	\		Carratania	haus Dassus		laaad	- Comming	ation D	at a / mana / d d / m m m /
Date of Birth (mm/dd/yyyy)	)		Country W	here Passpo	orτ	issuea	Expir	ation D	ate ( <i>mm/dd/yyyy</i> )
Country of Birth	Count	try of Citiz	zenshin	II S Social	Se	curity Number ( <i>if</i> a	any)	Δ-Num	nber ( <i>if any</i> )
Country of Birth	Court	cry or creiz	crisiiip	0.5. 50clai	30	carry Namber (ij t	<i></i>	A Null	ioer (ij uriy)
Date of Last Arrival (mm/do	d/yyyy)	I-94 Nu	ımber C		Current Nonimmigrant Status		Expires on (mm/dd/yyyy)		
Family Name (Last Name)		Given Na	me (First Name)		F	Full Middle Name		Relation to Beneficiary	
Data of Birth Imm/dd/www	\		Country W	here Passpo	r+	Issued	Evnir	ation D	ata (mm/dd/uuu)
Date of Birth (mm/dd/yyyy)			Country vv	nere rasspu	ЛL	issueu	Ехріі	ation D	ate ( <i>mm/dd/yyyy</i> )
Country of Birth	Count	try of Citiz	zenship	U.S. Social	Se	curity Number (if	anv)	A-Nun	nber ( <i>if any</i> )
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Date of Last Arrival (mm/dd/yyyy) I-94 No		I-94 Nu	umber			Current Nonimmigrant S		Status Expires on (mm/dd/yy	
Family Name (Last Name) Given Name			me (First Name) Full		Full Middle Name		Relation to Beneficiary		
Date of Birth (mm/dd/yyyy) Country Where Passport Issued Expiration Date (mm/dd/yyyy)									
Country where rassport issued Expiration Date (min/dd/yyyy)									
Country of Birth	Count	try of Citiz	zenship	U.S. Social	Se	curity Number (if	anv)	A-Num	nber ( <i>if any</i> )
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Date of Last Arrival (mm/dd/yyyy) I-94 N			umber			Current Nonimmigrant St		Status	Expires on (mm/dd/yyyy)



## H. Position Information - <u>Please be sure to complete ALL of page 4 before submitting this form to the Immigration team.</u>

Perficient Job Title (e.g., Technical Consultant)	Business Unit (e.g., IBM BPMS)	Annual Salary
General Manager:	Perficient Supervisor Name and Job Title	Remote or Onsite Supervision?
Client's Legal Name and SOW Job title		
Worksite Location(s) - List <u>ALL</u> physical street add number of day(s) per month expected to be at ea Client.)	the control of the co	• •
Ex 123 Main Street St. Louis, Missouri 6314 1. 2. 3.	1 – 5 days a week – Perficient Office	
Job Description – Please provide a 5-6 bullet poi	nt job description. Focus on the technical pa	arts of your role.
Programming Languages:		
Web Technologies:		
Scripting Languages:		
Databases:		
DevOps:		
Frameworks:		
Protocols:		
Web Services:		
Debug tools:		
Will this petition be filed with Premium Proces	sing? (Immigration Team Use Only)	
Immigration Case Manager	Dat	re