Non - Resident Alien Information Form

Complete this form only if you are a Non-Resident alien for tax purposes. This form will be used to determine your tax status for wages paid by the University of Toledo.

BASIC INFORMATION:			
Last Name:	First Name:		Middle:
Social Security Number	University ID#	Г	Date of Birth:
USA ADDRESS			
Street :	Apt	Toledo, Ohio	Zip Code:
Home Phone:	Day Phone:		
E-Mail:			
FOREIGN ADDRESS Enter your home or permanent addr	ess abroad.		
Address line 1	Add	lress line 2	
City Postal Code	City		
Providence / Region	Regional Postal Code	(Country
Country Information			
What country issued your passport?	Passport Numb	oer	Expiration Date
Enter the Country for which you are	e a TAX resident		
Year Data			
Estimated annual income from emp	loyment at The University of Toledo th	his calendar year. (J	(an 1 - Dec 31)
What are you doing at the Universit	ty? (IE: Professor, Researcher, Teachin	ng Assistant)	
 [] I am married to a U.S. citizen [] I will not be a Tax Resident in [] I am a Dual Resident Taxpayer [] I do not wish to claim Treaty E. 	awful permanent resident of the U.S. (my Tax Resident Country at year end. r. List countries xemptions from taxes even though I maxed as a U.S. resident (Attach Form 10)	Date tax resident e	
I am a student type: (check one) [] Undergraduate	[] Graduate Student [] Post Gr	raduate []	Medical Student
Check one: [] I am engaged in FULL-TIME s [] I am engaged in PART-TIME s			

VISA DETAIL

Fill in the Visa and Immigration status for each of the last 7 years.

	Visa Type	Visa Number	PRIMARY reason for entering the U.S. (use code below)	Date Arrived in U.S.	Left U.S. (or expected departure date)	J1 Subtype
Current Visa:						
Prior Visa:						
Prior Visa:						
Prior Visa:						

Primary Activity Codes:

01 Studying Degree Program	08 Acquire Training	15 Supporting an artist / athlete
02 Studying Non Degree Program	09 Demonstrating Special Skills	16 Tourist
03 Teaching	10 Clinical Activities	17 Business Activities
04 Lecturing	11 Temporary Employment	18 Board of Director Activities
05 Observing	12 Here with Spouse or Relative	19 Practical Training / J-1 F-1
06 Consulting	13 Performing as an artist	20 Educational/ Professional Activities
07 Conducting Research	14 Performing as an Athlete	21 Summer Travel Work

J-1 Subtypes

01	Student	06	Specialist	11	Trainee Medical
02	Short Term Scholar	07	Alien Physician	12	Research Scholar
03	Trainee- Non-Medical	08	Other - International Visitor	13	Summer Travel/ Work
04	Teacher	09	Other - Alien of the	99	Not Applicable
05	Professor	10	Other - Camp Counselor		

(Payroll Information Only: Run Substantial Presence Test)

ATTACHMENTS

Before this form can be processed, you must attach copies of the following.

- ➤ Passport (Page 1 only showing your identification and passport number)
- Visa (Attach copies of your U.S. Visa plus pages clearly showing entry and exit dates)
- Form I-94 showing current Immigration Status and duration of stay. Copy front and back.
- Form I-20-ID Certification of Eligibility of Non-immigration (F-1) Student Or IAP66 Certification of Eligibility for Exchange visitor (J-1) Status.

Remember to bring your visa with you when submitting this form in case there are any questions.

AUTHORIZATION

Under penalties of perjury, I certify that the above inform	ation is true and correct.
Sign_	Date

Before submitting this form, PLEASE REVIEW:

Did you complete each item and fill in all the blanks? Incomplete forms cannot be processed. Did you attach the required documents?

Do you have your visa with you when submitting this form to payroll? (Rocket Hall room 1700)