

## LSUHSC-9

## H-1B NONIMMIGRANT WORKER PRIOR APPROVAL FOR HIRE (OR EXTENSION)

- New Hire or Change of Status to H1B  
 Extension for current LSU HSC H1B employee  
 Change of Employer for current H1B beneficiary

FACULTY SPONSOR: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

Dept. Address: \_\_\_\_\_

Dept. Contact: \_\_\_\_\_

Dept. Contact Phone: \_\_\_\_\_

Dept. Contact Email: \_\_\_\_\_

POSITION TITLE: \_\_\_\_\_

PROPOSED SALARY: \_\_\_\_\_

\*Attach Position Description, approved Training Plan and/or Advertisement.

FEDEX ACCOUNT# \_\_\_\_\_ (required)

PROPOSED DATES OF EMPLOYMENT\*: FROM: \_\_\_\_\_ To: \_\_\_\_\_

\*See form instructions for information on how to choose dates

PATIENT CARE/CONTACT REQUIRED: Yes No

LICENSE REQUIRED: Yes No

WILL ANY WORK BE PERFORMED OFF SITE?\* YES NO

For purposes of an H1B petition, "off site" is considered to include locations where actual productive work will be performed, but which are not offices/facilities/locations of the petitioner (LSUHSC).

Off site does **not** include locations where occasional lectures, educational conferences or meetings may take place.

## NAME OF PROPOSED BENEFICIARY

LAST: \_\_\_\_\_ FIRST: \_\_\_\_\_ M: \_\_\_\_\_

DOES THE ALIEN SPEAK FLUENT ENGLISH: Yes No

HOW HAS ENGLISH FLUENCY BEEN VERIFIED? Interview Phone Call Other: \_\_\_\_\_

Department agrees to pay for the following fees associated with this H-1B filing:

\$460 I-129 petition	\$500 fraud prevention (n/a to extension of current LSUHSC employee)	\$2,965 premium processing
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USCIS will now only accept electronic funds. ISO will initially pay via P card, and reallocate expenses to the dept account(s) indicated

Dept. Account # (to allocate total expense)	Distribute between two accounts	1st Dept. Account #	\$	Amount
		2nd Dept. Account #	\$	Amount

## Departmental Approvals:

Date:

Funds Approved/Business Manager: \_\_\_\_\_

\_\_\_\_\_

Section Head (if applicable): \_\_\_\_\_

\_\_\_\_\_

Department Head: \_\_\_\_\_

\_\_\_\_\_

International Services: \_\_\_\_\_

\_\_\_\_\_

Dean: \_\_\_\_\_