The chairperson of the sponsoring department should send to the appropriate Dean, a formal request for the university to petition the Department of Homeland Security on behalf of the prospective international faculty. The onus is on the Chairperson, by way of a memorandum, to satisfy the Dean (and by extension the Provost) that the individual has the requisite outstanding academic credentials, experience and scholarly potential.

Required Documents for H-1B Processing:

Collect the following evidentiary requirements and send them to the attention of Dr. Margaret Roberts-Davis, Asst. V.P. Academic Affairs, Truth Hall, 300. For your convenience we’ve listed the documents in order of importance.

- Copy of appointment memo/letter indicating proposed salary and faculty rank
- Two paragraphs regarding the proposed duties at MSU, and your professional background (see pg. 10)
- Printed and signed H-1B Worksheet (pgs. 3 - 9)
- Updated copy of Curriculum Vitae
- Photocopy of Doctoral diploma and Undergraduate degree diploma. If possible, please provide OIS with copies of all degrees.
- Transcripts of degrees. Please ensure that translations are provided, if necessary. The following attestation must be printed and signed on each individual translation:

  “I certify that I am competent to translate from ______________ into English and that this is a true English translation of the attached document in the ________________ language.”
Filing fee(s) for the Form I-129 or H petition; the Form I-539 or H-4 dependent petition; and the Form I-907 or the Premium Processing petition. Personal bank checks or money orders can be made out to: Department of Homeland Security. Go to the following website for current filing fees, and click on “Immigration Forms”: http://www.uscis.gov/portal/site/uscis

If the beneficiary is in the United States, the following documents are also necessary:

- Photocopy of all Form I-797(s), Form I-20s, Form DS-2019s, and/or Employment Authorization Documents indicating authorized, uninterrupted work or stay in the United States.
- Copy of latest pay stub if employed by a U.S. employer
- Copy of the last Form I-94 arrival/departure record issued at a U.S. Port of Entry. Please photocopies of the front and back and make sure the date of entry, and visa classification, are completely legible.
- Copy of the biographical data page in beneficiary’s passport bearing photograph, passport expiration date, country of permanent residency, country of citizenship, and passport number.
- Copy of latest visa stamp
- Copy of I-797 Approval Notice for all waivers of 212(e) if the beneficiary was in J-1 status.

Form I-539 for H-4 dependents and filing fee. International Services is not authorized to sign the Form I-539 on a dependant’s behalf but we do file the application with the Form I-129 (H-1B) application as a courtesy. The form can be downloaded from the following address: http://www.ins.usdoj.gov/graphics/formsfee/index.htm
Please follow the instructions carefully and submit the form itself in addition to all requested evidentiary documents.
H-1B WORKSHEET:

Please type or print legibly when completing this worksheet. If a question does not apply, write "n/a" but answer all questions as accurately as possible. This worksheet provides the data we need when issuing a Form I-129 (H-1B) petition.

1. Full name_______________________________________________________ (family/surname) (given/first) (FULL middle name)

   Sex □ Female □ Male

   MSU department ___________________________________________________

   Title of appointment_________________________________________________

   Proposed Annual Salary: ____________________________________________

2. Present living address_______________________________________________

   ________________________________________________________________

   Home phone __________________ Work phone _________________________

   Email address_____________________________________________________

2. Social security number (if any)_________________________________

3. Date of birth_____________________________________________________

   City and country of birth_________________________________________

5. Province of birth_________________________________________________

6. Country of citizenship____________________________________________
7. Country of legal permanent residence ____________________________

(Complete #8, #9, #10 and if you are currently in the U.S.; otherwise go to #11.)

8. Date and port of last arrival in the U.S. ____________________ (month/day/year)

____________________________________________________
(port or City where you last entered the U.S.)

9. Form I-94 # ______________________________

Expiration date ____________________________

(Attach COMPLETELY LEGIBLE photocopy - front and back)

(If photocopy is not attached, why?)
Original lost____ Stolen____ Destroyed____)

10. Present nonimmigrant classification ________________________

Expiration date ______________________________

11. If you have ever been in J-1 status, have you been subject to 212(e) or the Two Year Home Residence Requirement? _________________________________________

(please attach a copy of the waiver and/or other evidence to support that you have met the requirements of 212(e))

12. If Consular Notification is being requested you will need to apply for an H-1B visa stamp abroad. If you’d like Consular Notification of your Approval, please list the U.S. Embassy/Consulate where you intend to apply for a visa:

_________________________________________________________________
(City and Country)

13. Within the last 7 years, have you or your dependents ever been granted the classification (H-1B or H-4) we are now requesting? Yes ____ No _____. If “Yes”,


list (for yourself and family members) dates of prior periods of stay in H classification. The US CIS requires that ALL previous periods of H employment be listed on H-1B applications. If you have worked for more than one H employer, please list the day you STARTED with a new employer under portability provisions. If your H-1B request was denied for any reason, please give information pertaining to the denial in addition to attaching the US CIS notice of denial indicating the service’s reasoning.

1st.______________________________________________________________________

2nd_____________________________________________________________________

3rd._____________________________________________________________________

[name of institution(s)]               [start date, mm/dd/yy]                    [end date, mm/dd/yy]

14. Passport # _________________  issued by_________________________________ (country)

Date of passport issuance________________________________________________________

Expiration date (month/day/year)__________________________________________________

Expiration of passport should be valid for six months beyond the intended period of beneficiary’s stay. If your passport is expiring shortly, please speak with the Director of International Services.

15. Permanent foreign address ________________________________________________ (number and street)

_______________________________________________________________
(city or town)  (county, district, province or state)

_______________________________________________________________
(postal code)       (country)

16. Have you received a higher education degree from a U.S. institution? (Masters, Ph.D, J.D., etc.) □ Yes □ No

If so, give the full name and the address of the U.S. institution in addition to the highest degree awarded:

______________________________________ ____________________
(name of U.S. institution)          (degree awarded)
17. Because the H-1B visa is employer and site-specific, this petition will only permit you to work for a specific department within Morgan State University. You will not be able to receive remuneration of any kind from another employer, be it per diem, honorarium, etc. In order for you to work for another employer, the new employer must first obtain approval from US CIS by filing another H-1B application. In addition, if you plan to remain at MSU and participate in outside employment, it will be necessary for you to obtain approval from your department for any such outside activity in advance. Do you understand this? Yes____ No____.

18. Has an immigrant visa petition ever been filed on your behalf? Yes ___ No ___

Please list all details pertaining to filings of I-140, I-485s, and I-765s, including the form you’ve filed, the date of receipt, and the date of approval.

__________________________  ____________________________  __________________________
(type of form)  (date of receipt by US CIS)  (date of approval)

(If in the U.S., complete #20, #21, #22, #23; otherwise go to #24.)

20. Are you or any of your dependents in exclusion or deportation proceedings?
Yes ____ No ____.  IF "Yes" EXPLAIN:

____________________________________________________________________

____________________________________________________________________

21. Have you, or any of your dependents included in the application, done anything which violated the terms of the nonimmigrant status you now hold?
Yes____ No _____.  IF "Yes" EXPLAIN:

____________________________________________________________________

____________________________________________________________________
22. Have any of your dependents been employed in the U.S. since last admitted or granted an extension of stay or change of status? Yes ___ No ___. If "Yes" give name of dependent, name and address of employer, weekly income, and whether specifically authorized by the US CIS:

23. If you have been in the U.S. on an H-1B, did you have any unauthorized breaks in employment (were you taken off payroll for an employer?).

☐ Yes  ☐ No.

(If you’ve answered “Yes,” please speak with an advisor in the International Education Services Office. This remains true of individuals who were taken off payroll yet were still within their period of authorized stay).

24. Are you married? ☐ Yes  ☐ No

If you are currently in the United States and are married/have children, supply the following information. If your spouse/children DO NOT need H-4 sponsorship, please only give their names:

Spouse:
Name (family name, given name, middle initial) ____________________________
Requires H-4 sponsorship? ☐ Yes  ☐ No
Date of birth (month/day/year) __________________________________________
Country of birth _____________________________________________________
Social Security Number _______________________________________________
A# (if known) _______________________________________________________
Date of Arrival in the U.S. _____________________________________________
I-94# _________________________________________________________  
Current nonimmigrant status __________________ Expires on ________________
Country issuing passport ____________________________________________
Passport expiration date (month/day/year) ______________________________

Children:  
Name (family name, given name, middle initial) ____________________________  
Requires H-4 sponsorship? □ Yes □ No
Date of birth (month/day/year) __________________________________________
Country of birth _____________________________________________________
Social Security Number _________________________________________________
A# (if known) ________________________________________________________
Date of Arrival in the U.S. ______________________________________________
I-94# _____________________________________________________________  
Current nonimmigrant status __________________ Expires on ________________
Country issuing passport _____________________________________________
Passport expiration date (month/day/year) ________________________________

Name (family name, given name, middle initial) ____________________________  
Requires H-4 sponsorship? □ Yes □ No
Date of birth (month/day/year) __________________________________________
Country of birth _____________________________________________________
Social Security Number _________________________________________________
A# (if known) ________________________________________________________
Date of Arrival in the U.S. ______________________________________________
I-94# _____________________________________________________________  
Current nonimmigrant status __________________ Expires on ________________
Country issuing passport _____________________________________________
Passport expiration date (month/day/year) ________________________________

Name (family name, given name, middle initial) ____________________________  
Requires H-4 sponsorship? □ Yes □ No
Date of birth (month/day/year) __________________________________________
Country of birth _____________________________________________________
Social Security Number _________________________________________________
A# (if known) ________________________________________________________
Date of Arrival in the U.S. ______________________________________________
I-94# _____________________________________________________________  
Current nonimmigrant status __________________ Expires on ________________
Country issuing passport _____________________________________________
Passport expiration date (month/day/year) ________________________________
Name (family name, given name, middle initial) ____________________________

Requires H-4 sponsorship? ☐ Yes ☐ No

Date of birth (month/day/year) __________________________________________

Country of birth ______________________________________________________

Social Security Number _______________________________________________

A# (if known) _______________________________________________________

Date of Arrival in the U.S. _______I-94#________________________________

Current nonimmigrant status ________________ Expires on __________________

Country issuing passport _______________________________________________

Passport expiration date (month/day/year) __________________________________

**************************************************************************
**************************************************************************

25. I hereby certify that the information provided on this worksheet and the evidence
submitted is true and correct.

_________________________________ _____________________________
Signature      Date

_________________________________
Print Name
Paragraphs Describing Position and Professional Background:

Write two paragraphs using the below examples for reference. The first sentence in the paragraph entitled “Description of Proposed Duties” should contain the prime objective of your position (e.g. teach undergraduate and graduate classes in English and/or conduct research). Please try to make the paragraph describing your research or publishing projects understandable to a lay reader, as the information is intended for adjudicators who may not be experts in your field.

**SAMPLE PARAGRAPHS:**

**Professional Background and Summary of Prior Work Experience:**

Dr/Mr/Ms (last name) received a B.S. degree from the Technical University of Civil Engineering in 1993, and a M.S. degree in Civil Engineering from the University of Iowa in 1996. He received a Ph.D. degree in Hydrometeorology and Water Resources from the same university in 1999. Since January of 2000, Dr/Mr/Ms (last name) has been working as a Visiting Research Associate with the National Institute of Standard and Technology in Gaithersburg, Maryland.

**Description of Proposed Duties:**

Dr/Mr/Ms (last name) will conduct research in atmospheric physics at the Atmospheric and Space Science Research Center, UMBC. His research will focus on culling data from satellite observations to estimate precipitation. Specifically, he will analyze data from the Tropical Rainfall Measuring Mission (TRMM) project. The TRMM satellite features a unique combination of instruments consisting of a precipitation radar and a radiometer. Radiometers are inexpensive instruments with an established history deployed in space to globally monitor the hydrologic resources. The space-borne precipitation radar is a cutting-edge technology with a short history and data record. From the practical point of view it is desirable to derive methodologies to estimate precipitation from the more readily available radiometer data. Dr. X will be involved in the development of such a methodology. (Note:
if you are a teaching Faculty member, be sure to include your specific teaching responsibilities).

Contacting the Office of International Services

Email:  
Phone: 443-885-3078  
Fax: 443-885-8208

Mailing: Morgan State University  
Office of International Services  
Carter Grant Wilson, 202  
1700 E Cold Spring Lane  
Baltimore, Maryland 21251

Advisor: Richard Kitson-Walters, Ed.D.  
Director, Office of International Services  
kitson.walters@morgan.edu