



UWG H-1B Acknowledgement Form

Date of Request:			
Employee Name:	Position:		
Supervisor:	Department	:	
Employment Date:		Employment Authorization Start Date (if different from Employment Date):	
Justification (Include justification I	if an H-1B is being requested	d for a non-tenure track faculty member):	
another three year period, at addit years. After the six years is exhaust a permanent resident during that t University support for qualified pos	cional costs incurred by the oten ted, employment must be te cime. Permanent residency n sitions.	ich time the petition may be extended for department, for a total period of six erminated, unless the employee becomes may be pursued independently, or through they understand the temporary nature of	
Department Approver		Date	
Dean		Date	
Human Resources		Date	
Vice President		Date	
HR Use Only: Estimated Cost (regular vs. premium):	Country of Origin:	Current Status:	