



HOBART AND WILLIAM SMITH COLLEGES

FOREIGN NATIONAL INFORMATION FORM

All applicable questions below must be answered. A copy of your I-94 Card, VISA, Passport, and an I-20 / DS-2019 or I-797 must be attached to this form. This form must be returned before any check can be issued by Payroll or Accounts Payable and must also be completed by anyone receiving tuition remission/scholarship.

NAME
SOCIAL SECURITY NUMBER
CWID

U.S. LOCAL ADDRESS:
Street
Address Line 2
Address Line 3
City
State Zip Code

FOREIGN RESIDENCE ADDRESS:
Street
Address Line 2
Address Line 3
City Province/Region
Country Postal Code

Country of Citizenship
Country that Issued Passport
Passport #
Expiration Date
Visa #

Your Current Immigration Status
U.S. Immigrant/Permanent Resident
F-1 Student
J-2 Spouse or Child of Exchange Visitor
J-1 Exchange Visitor
H-1 Temporary Employee
Other

If Immigration Status is J-1, What is the Category?
Student
Professor
Research Scholar
Short Term Scholar
Alien Physician
Other

If a student, what type?
Undergraduate
Masters
Full-Time
Part-Time
If married, is your spouse in the U.S.?
Yes
No
Number of dependents

What is the Primary Purpose of Your Current Stay in the U.S.?
Studying in a Degree Program
Observing
Demonstrating Special Skills
Studying in a Non-Degree Program
Consulting
Clinical Activities
Teaching
Conducting Research
Temporary Employment
Lecturing
Training
Here with Spouse

What is the actual date you entered the United States in your current visa status?
What is the start date of your immigration status for this primary activity?
What is the projected end date of your immigration status primary activity?

## SUBSTANTIAL PRESENCE TEST WORKSHEET

### HISTORY OF PRESENCE IN THE U.S.

Please list any visits to the United States (attach additional page(s) if necessary).

| Date of Entry<br>(Month/Day/Year) | Date of Exit<br>(Month/Day/Year) | Visa Immigration Status | J-1 Subtype (if applicable) | Primary Activity<br>(See below) | Have you taken any treaty benefits? |                             |
|-----------------------------------|----------------------------------|-------------------------|-----------------------------|---------------------------------|-------------------------------------|-----------------------------|
|                                   |                                  |                         |                             |                                 | <input type="checkbox"/> Yes        | <input type="checkbox"/> No |
|                                   |                                  |                         |                             |                                 | <input type="checkbox"/> Yes        | <input type="checkbox"/> No |
|                                   |                                  |                         |                             |                                 | <input type="checkbox"/> Yes        | <input type="checkbox"/> No |
|                                   |                                  |                         |                             |                                 | <input type="checkbox"/> Yes        | <input type="checkbox"/> No |
|                                   |                                  |                         |                             |                                 | <input type="checkbox"/> Yes        | <input type="checkbox"/> No |
|                                   |                                  |                         |                             |                                 | <input type="checkbox"/> Yes        | <input type="checkbox"/> No |
|                                   |                                  |                         |                             |                                 | <input type="checkbox"/> Yes        | <input type="checkbox"/> No |
|                                   |                                  |                         |                             |                                 | <input type="checkbox"/> Yes        | <input type="checkbox"/> No |
|                                   |                                  |                         |                             |                                 | <input type="checkbox"/> Yes        | <input type="checkbox"/> No |
|                                   |                                  |                         |                             |                                 | <input type="checkbox"/> Yes        | <input type="checkbox"/> No |
|                                   |                                  |                         |                             |                                 | <input type="checkbox"/> Yes        | <input type="checkbox"/> No |

| PRIMARY ACTIVITIES:               |               |                                 |                        |
|-----------------------------------|---------------|---------------------------------|------------------------|
| 01 Studying in a degree program   | 04 Lecturing  | 07 Conducting research          | 10 Clinical activities |
| 02 Studying in non-degree program | 05 Observing  | 08 Training                     | 11 Temporary employee  |
| 03 Teaching                       | 06 Consulting | 09 Demonstrating special skills | 12 Here with spouse    |

| TAX TREATY EXEMPTION INFORMATION   |
|--|
| <p><i>You must have a Social Security Number or Individual Taxpayer Identification Number to apply for a tax treaty benefit</i></p>  |
| <p>Payments to nonresident aliens for services performed or benefits received within the U.S may be subject to a maximum withholding rate of 30%. If you are a nonresident alien and believe that you may qualify for a tax treaty exemption, additional forms must be submitted with this completed Foreign National Information Form.</p>                            |
| <p>IRS Form 8233 is used by nonresident aliens to claim exemption from withholding on compensation for Independent Personal Services and some Dependent Personal Services. The exemption must be based on a tax treaty to which the United States is a party. A new Form 8233 must be submitted for each calendar year with the Foreign National Information Form.</p> |
| <p>IRS Form W-8BEN is used by nonresident aliens to claim exemption from withholding on other types of income (e.g. scholarships, grants, fellowships, royalties). The exemption must be based on a tax treaty to which the United States is a party.</p>  |

### NEED A HISTORY OF YOUR ARRIVALS & DEPARTURES?

View your U.S. arrival and departure history for the past 5 years (certain types of travel history may not be provided).

<https://i94.cbp.dhs.gov/I94>

|  |                   |
|--|-------------------|
| <p>I hereby certify that all of the above information is correct and true. I understand that if there is any change in my status I must submit a new Foreign Information Form.</p> |                   |
| <p>Signature _____</p>   | <p>Date _____</p> |