



FOREIGN VISITOR INFORMATION FORM

VISITOR'S INFORMATION			
Last or Family Name:		First:	Middle:
Date of Birth:	Country of Birth:	Email Address:	
Sex:		Phone Number:	
U. S. Social Security No. or Individual Taxpayer Identification Number:		Work Number:	Fax Number:
ADDRESSES			
U.S. Local Street Address		Foreign (home) Residence Address <i>(SHOULD NOT BE P.O. BOX)</i>	
<i>Street</i>		<i>Street</i>	
<i>City</i>		<i>City</i>	<i>Province/State</i>
<i>State</i>	<i>Zip Code</i>	<i>Country</i>	
CITIZENSHIP			
<i>Passport number</i>		<i>Expiration Date</i>	<i>Dual Citizenship?</i>
<i>Country of Issue</i>		<i>If "Yes," Name of Country</i>	
CURRENT IMMIGRATION STATUS			
VISA NUMBER:	VISA TYPE:	OTHER:	VISA EXPIRATION DATE:
IF J-1 Exchange Visitor, what category? " Student Professor Research Scholar Short Term Scholar Other:			

Visitor's Signature: _____ Date: _____