



Non Citizen Independent Contractor/Guest Traveler Payment Form

University of Tennessee • Payroll Office
P115 Andy Holt Tower • Knoxville, Tennessee 37996 • (865) 974-5251 • Fax: (865) 974-3530

PERSONAL INFORMATION

Last or Family Name: _____
First: _____ Middle: _____
U.S. Social Security No. or Individual Taxpayer Identification No.: _____
Email Address: _____

U.S. Local Street Address: _____ Foreign Residence Permanent Address: (Do not use P.O. Box)

_____	_____	_____	_____
<i>Street</i>	<i>Street</i>	<i>City</i>	<i>Province/State</i> <i>Postal Code</i>
_____	_____	_____	_____
<i>City</i>	<i>City</i>	<i>Province/State</i>	<i>Postal Code</i>
_____	_____	_____	_____
<i>State</i>	<i>Zip Code</i>	<i>Country</i>	

PASSPORT INFORMATION

Country of Citizenship: _____
Country that issued passport: _____
Passport No.: _____ Expiration Date: _____
Visa No.: (Control Number in Upper Right Corner of Visa): _____

VISA DETAIL

CURRENT IMMIGRATION STATUS

B-1 Visitor for Business	B-2 Visitor for Pleasure
WB Business Waiver	WT Tourist Waiver
F-1 Student	Q-1 Intl Cultural Exchange
O-1 Indiv. With Extraordinary Ability or Achievement	P-1 International Athlete or Entertainer
J-1 Exchange Visitor*	Other: _____

**IF J-1 Exchange Visitor not sponsored by UT, attach authorization letter from Responsible Officer at Sponsor*

PRIMARY ACTIVITY DURING THIS VISIT (Choose Only One)

Teaching	Speaking	Conducting Research
Training	Consulting	Other _____

What was the start date of your immigration status for this activity? _____
(The date you first entered the U.S. for the primary activity –I-94 departure record) Month / Day / Year

If you are a consultant or self-employed individual that will receive an honorarium for the primary activity, complete questions 1-5.

(1) Describe the activity (teaching, lecturing, conducting research, training, consulting) you are receiving self-employment income for:

(2) List the number of days you will perform services at the University of Tennessee: _____ # of days

(3) List the number of institutions from which you have received payments (for academic-related services) during the last 6 months: _____ (# of institutions)

(4) Do you/will you have an office? (fixed base) in the U.S.? Yes No

(5) If yes how many days in this tax year did you/will you have an office (fixed base)? _____ # of days

INCOME TYPE/AMOUNT/

Payment Type: Honorarium Prize/Award Travel Other

Name of UT department providing the income: _____ Amount: _____

RESIDENCY VERIFICATION

What country did you live in before this visit to the U.S.? _____

Did you pay taxes as a resident of that country? yes no

Did your tax residency in that country end prior to this visit to the U.S.? Yes No

If yes, When? _____

Month / Day / Year

U.S. IMMIGRATION HISTORY

Have you ever had another immigration status in the United States? Yes No

Have you ever been present in the United States before this visit? Yes No

(If either question is answered "yes", complete U.S. Immigration History, Part 2)

U.S. IMMIGRATION HISTORY, Part 2

What is the actual date you first entered the United States? _____

Month / Day / Year

List all VISA Immigration Activity during the last three calendar years and all F, J, M or Q Visa Activity since January 1, 1985)

Date of U.S. Entry Month / Day / Year	Date of U.S. Exit Month / Day / Year	Visa/ Immigration Status	J-1 Category	Primary Activity	Have you taken any Treaty Benefits?	
_____	_____	_____	_____	_____	Yes	No
_____	_____	_____	_____	_____	Yes	No
_____	_____	_____	_____	_____	Yes	No
_____	_____	_____	_____	_____	Yes	No
_____	_____	_____	_____	_____	Yes	No
_____	_____	_____	_____	_____	Yes	No
_____	_____	_____	_____	_____	Yes	No
_____	_____	_____	_____	_____	Yes	No

I hereby certify that all of the above information is true and correct. I understand that if my status changes from that which I have indicated on the form, I must submit a new Foreign National Information Form to the University of Tennessee Payroll Office.

Signature: _____ Date: _____