Division of INTERNATIONAL SERVICES

LAWFUL PERMANENT RESIDENT (LPR) PETITION WORKSHEET

(To be completed by the beneficiary)

This form will not be accepted unless the sponsoring Institute/Center has submitted an approved request to DIS.

INSTRUCTIONS: In order to help DIS process your LPR petition, please complete this form and return it to the DIS with all required supporting evidence. Include a copy of your passport ID page and most recent I-94 form. Type or print clearly. All questions MUST be answered. If not applicable, write "N/A." Please see checklist for additional documents required for this petition.

A. Personal

Last Name:		First Name:		Full Middle Name:	
All Other Names Used:					
Marital Status: ☐ Married ☐ Single Children: ☐ Yes ☐ No					
City/Town/Village of Birth:					
Country of Birth		Province/State of Birth			
Home Country Address:					
U.S. Home Address:					
Work Site/Lab Address:					
Daytime Phone # *(with area/country code)*:		Current Salary (per year):	$		

If your native alphabet is other than Roman letters, on a separate sheet of paper, write your name and home country address in your native alphabet. Write your name (in Roman letters) at the top of the sheet of paper.

B. Immigration Status

Most recent arrival date: _____

Current Nonimmigrant Status: ☐ F-1 ☐ F-2 ☐ J-1 ☐ J-2 ☐ H-1B ☐ H-4 ☐ TN ☐ Other (specify) _____

Expiration Date (ending date on I-20, EAD, DS-2019, I-797, I-94, etc.) _____

Were you ever in J-1 or J-2 Exchange Visitor Status? ☐ Yes ☐ No
If yes, provide evidence that the home residence requirement was fulfilled or was not applicable.

Do you have any plans to travel outside of the US between now and the **filing** date of this petition? ☐ Yes ☐ No

In addition, do you have any plans to travel outside of the US while this petition is **pending** with USCIS*? ☐ Yes ☐ No
*USCIS (U.S. Citizenship and Immigration Services) is an agency of the Department of Homeland Security.

If yes, please list anticipated dates of travel: _____

CONSULT WITH YOUR IMMIGRATION SPECIALIST BEFORE FINALIZING TRAVEL PLANS!!

C. *Immigrant Visa ("Green Card") Application Information*

Choose One:

☐ I am in the U.S. and plan to apply for adjustment of status to that of a lawful permanent resident.

Print last permanent residence address abroad: _____

☐ I plan to apply for my immigrant visa abroad at a U.S. Embassy or Consulate.

Please indicate the city and country of the Consulate you will visit:

City: _____ Foreign Country: _____

D. Petition Information

Are you in removal proceedings? ☐ Yes ☐ No

Has an immigrant visa petition ever been filed by you or on your behalf? ☐ Yes ☐ No

If you answered yes to any of the above questions, please provide the case number, office where filed, and final decision on petition.

E. Family Information. Provide the name of your spouse and all unmarried children under the age of 21.

Name *(First/Middle/Last)*	Relationship	Date of Birth *(mm/dd/yyyy)*	Country of Birth

F. Signature

I certify that I have read all information provided on this worksheet. The information above and documents submitted as they relate to this petition are true and correct. I understand that any misrepresentation of information or document fraud may result in termination of my employment at NIH. I also understand that information and materials submitted with this worksheet may be shared with other government agencies. In addition, I understand that my application could be delayed as a result of mandatory Department of Homeland Security (DHS) security checks. To the best of my knowledge, there is no adverse information that would negatively affect the LPR petition. I understand that DHS determines final approval of the LPR petition.

_____	_____	_____
Signature of Beneficiary	Printed Name of Beneficiary	mm / dd / yy

LPR I-140 CHECKLIST

A. Submit the following required documents. Any document not in English must be translated.

- ☐ 1. Copy of ALL diplomas/certificates AND English translation if applicable (minimum of MD or PhD required)
- ☐ 2. Copy of transcript if your field of study is not indicated on diploma/certificate
- ☐ 3. Credentials evaluation if degree earned abroad (highly recommended, but not required; for a list of evaluators, go to http://www.naces.org/members.htm)
- ☐ 4. Current Curriculum Vitae (CV)
- ☐ 5. Copy of Form SF-50 (indicating the position that qualifies for LPR-sponsorship, e.g. Staff Scientist)
- ☐ 6. If your native alphabet is other than Roman letters, write your name and home country address in the native alphabet on a separate sheet of paper. Write your name (in Roman letters) at the top of the sheet of paper.
- ☐ 7. Copy of passport biographical page (including passport expiration date)
- ☐ 8. Copy of most recent I-94
- ☐ 9. Unaltered Original Document and Translation form (page 4)
- ☐ 10. Evidence to demonstrate I-140 qualifications as outlined by your Immigration Specialist. ***Please submit evidence as printed in Criteria handout.***
- ☐ 11. Draft Employment Letter from Scientific Director (see LPR Employment Letter Sample)

B. Petition Fee: check or money order in US dollars, drawn on a US bank, made payable to the "Department of Homeland Security".

- ☐ 12. Fee $475 (payable by beneficiary): ****DO NOT SUBMIT CHECK UNTIL NOTIFIED BY THE DIS****

Submit this form and required evidence to:

Division of International Services /ORS
31 Center Drive, MSC 2028
Building 31, Rm B2B07
Bethesda, MD 20892-2028

UNALTERED ORIGINAL DOCUMENTS

TO THE UNITED STATES CITIZENSHIP AND IMMIGRATION SERVICES/NIH

Copies of documents submitted are exact copies of unaltered original documents. I understand that I may be required to submit original documents to an Immigration or Consular official at a later date.

_____
Print Name of Beneficiary

_____
Signature of Beneficiary

_____
Date Signed

TRANSLATION OF FOREIGN LANGUAGE DOCUMENT(S)

(Translations must be done by someone other than yourself *or immediate family members*.)

I, _____, hereby certify that I am competent to translate from the _____ language into English and that the attached is the accurate translation of the original document(s).

_____
Print Name & Title of Translator

_____
Signature of Translator

_____
Date Signed