

CO-NRA

**OREGON UNIVERSITY SYSTEM
FOREIGN NATIONAL DATA REQUEST FORM**

The information requested on this form is used to determine your U.S. tax withholding status. You must complete this form (1) **before beginning employment**, (2) **if your visa status changes**, and (3) **at the beginning of each calendar year**. If you are not currently working, and do not plan to work in the next year you are not required to complete and turn in this paperwork.

PLEASE ATTACH A COPY, FRONT AND BACK, OF YOUR I-94 AND I-20 OR DS-2019

PART 1 - PERSONAL INFORMATION

1. Last Name First Middle	2. Social Security or ID Number
3. Street Address (U.S.)	4. University Name
5. City State Zip Code	6. Dept to be contacted
7. Home Phone Number Work Phone Number	8. E-mail Address
9. Primary purpose of visit to the United States. Please check the appropriate box. Faculty: _____ Student/GTF: _____ Practical Training- Attach copy of Professor/Researcher _____ Degree _____ Non-degree _____ authorization _____ Date of latest entry into USA for current purpose: _____ (do not include short breaks such as holidays, vacation etc.)	

PART 2 - CITIZENSHIP AND VISA INFORMATION

10. Citizen of:	11. Permanent Resident of: (If different from question 10)	12. Current Visa Type, F-1, J-1, etc.
13. Date Originally Entered USA for primary purpose as indicated in box 9	14. End Date on I-20 or DS-2019	15. Expiration Date on I-94 or D/S

PLEASE COMPLETE PARTS 3 AND 4 ON THE BACK OF THIS FORM

FOR OFFICE USE ONLY

Reviewed By:	Date:
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PART 3-DETERMINATION OF RESIDENCE STATUS FOR FEDERAL TAX WITHHOLDING

16. Furnish the requested information below to show the number of days you will be/were present in the United States during the calendar years listed. Calendar year refers to the period January 1 to December 31.

Calendar Year	Purpose: (for example teacher, researcher, or student)	Visa Type (F-1, J-1, etc.)	Number of days expected to be present in the U.S.
2009			

Calendar Year	Purpose: (for example teacher, researcher, or student)	Visa Type (F-1, J-1, etc.)	Number of days actually present in the U.S. during the year.
2008			
2007			
2006			
2005			
2004			
2003			
2002			
2001			

PART 4 - CERTIFICATION

I certify that to the best of my knowledge and belief all the information I have provided is true, correct, and complete.
I certify that I am aware there may be a treaty between the U.S. and my country of residence for which I may be eligible.

Do you currently have a Form W-9 on file? Yes ___ No ___ Do you wish to continue claiming treaty benefits? Yes ___ No ___

Signed: _____ Date: _____



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				Initials	Date
Substantial presence test met?	Yes	No	If no, date eligible for substantial presence		