



UNIVERSITY OF MARYLAND

Preliminary Information for Potential H Visa Applicant

This form has been developed in an attempt to discover and solve potential problems early in the H visa process. Please fill out the form as completely as possible and return it by FAX to (410) 706-4053.

Department initiating the H visa _____

Department contact person _____

e-mail address _____

Phone number _____ FAX number _____

What is your target date for having the H visa approved? _____

Applicant's Name _____

Applicant's Address _____

Country of Citizenship _____

Current Visa Type _____

Has the applicant ever had a J-visa? _____

If the applicant has, or has had, a J-visa, has a waiver of the "two year requirement" been approved? _____

If the applicant has had a J-visa and feels that the "two year requirement" does not apply to her/him, has an Advisory Opinion been received from USIA? _____

Has the applicant ever applied for U.S. Permanent Residency (a Green Card)? _____