



NORTH CAROLINA COMMUNITY COLLEGE SYSTEM
H. Martin Lancaster, President

January 25, 2005

MEMORANDUM

IMPORTANT INFORMATION
Deadline: February 15, 2005

TO: Selected Contacts
FROM: Kim Van Metre, Systems Accountant
SUBJECT: Foreign National Information System (FNIS)

You are receiving this directive because you were listed as the contact person(s) for your agency on the Foreign Nationals/Non-Resident Aliens survey submitted to OSC by your college in July 2004, or you were listed as the contact person submitted to Kim Van Metre with the college's federal tax identification number.

As you are aware, the Office of the State Controller is responsible for the statewide implementation of the Foreign National Initiative. Under their contract with Windstar, 29 community colleges will be managed through the System Office. The software and data will be maintained in the System Office, and we will need your help in gathering the initial data to enter into the software. This will be a two-step process.

Step One: Please complete the information requested in the attached spreadsheet for each foreign national or non-resident alien associated with your college. We will need a name, social security number, birth date, user name, and an email address for each individual. The user name can be any name you wish to assign to represent this individual in the Windstar software. Please indicate in the last column under each name whether the individual is a vendor, contractor, or employee using the key provided in the column heading. Once the information has been entered into the spreadsheet and saved, **please email the form back to me at vanmetrek@ncccs.cc.nc.us by February 15.**

Step Two: When the attached Excel spreadsheet is returned, the information from the file will be uploaded into a web application called FNIS (Foreign National Information System), which is a part of the Windstar suite OSC purchased. Once the initial information is uploaded into the FNIS system, we will schedule a training session on entering the required data into the FNIS system. A copy of the information needed to enter an individual into the system is attached. Please review the form and make sure you have this information readily available for each vendor, contractor or employee. This information must be entered into the FNIS web application and then submitted via the internet to the System Office. When a Foreign National/Non Resident Alien is hired, Human Resources should maintain a copy of the visa and any other supporting documentation in the personnel file. This should include an I-9 form, which will have the majority of the information needed for the software.

If you do not have any foreign nationals or non-resident aliens associated with your college, please respond accordingly. Please call me or email me with any questions or problems, and thank you for your cooperation and assistance in this matter.

attachments

pc: Mr. Kennon Briggs
Selected Presidents

S05-003
E-Mail

College Name: **North Carolina Community College System Office**

Institution Number: **8xx**

Employee: E
Vendor: V
Contractor: C Student:
S

//Last Name	First Name	Middle Name	Social Security Number	Date of Birth	Username	Email	
Example:							
Senter	Terry		123456789	11/25/1963	tsenter	tsenter@ncosc.net	E

Enter College Information Below:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.
- 10.
- 11.
- 12.
- 13.
- 14.
- 15.
- 16.
- 17.
- 18.
- 19.
- 20.

APPENDIX IV

FOREIGN NATIONAL INFORMATION FORM (Page 1)

All applicable questions below must be answered. A copy of both sides of your I-94 Form, "Arrival and Departure Record", copy of your US Visa from your passport, and visa documentation, for example I-20, DS-2019, or I-797 must be submitted with this form. This form and accompanying documentation must be submitted to the withholding agent before any steps can be taken to adjust taxation. Instructions are on the back of the form.

(1) Last or Family Name _____ First _____ Middle _____

(2) Social Security # _____ (3) Employee/Vendor ID # _____

(4) LOCAL ADDRESS IN U.S.:

Address Line 1: _____

Address Line 2: _____

Address Line 3: _____

City: _____

State: _____ Zip _____

(5) FOREIGN RESIDENCE ADDRESS:

Address Line 1: _____

Address Line 2: _____

City: _____

Postal Code: _____ Province/Region _____

Country: _____

(6) Country of Citizenship: _____ (7) Country that issued Passport: _____

(8) Passport #: _____ Expiration Date _____ mm/dd/yy (9) Visa # (control number): _____

(10) Have you been to the United States prior to this visit? Yes No. If yes, see Page 2.

(11) IMMIGRATION STATUS:

U.S. Immigrant/ Permanent Resident F-1 Student J-2 Spouse or Child of Exchange Visitor

J-1 Exchange Visitor H-1 Temporary Employee

Other: _____

(12) IF IMMIGRATION STATUS IS J-1, WHAT IS THE SUBTYPE? CHECK ONE:

01 Student 05 Professor 12 Research Scholar

02 Short Term Scholar Other: _____

(13) WHAT IS THE ACTUAL PRIMARY ACTIVITY OF THIS VISIT? CHECK ONE:

01 Studying in a Degree Program 05 Observing 09 Demonstrating Special Skills

02 Studying in a Non-Degree Program 06 Consulting 11 Temporary Employment

03 Teaching 07 Conducting Research 12 Here with Spouse

04 Lecturing 08 Training 21 Summer Work/Travel

(14) WHAT IS THE ARRIVAL DATE OF YOUR FIRST VISIT TO THE UNITED STATES?

_____/_____/_____
Month Day Year

(15) WHAT IS THE START DATE OF YOUR VISA FOR THIS PRIMARY ACTIVITY?

_____/_____/_____
Month Day Year

(16) WHAT IS THE PROJECTED END DATE OF YOUR VISA PRIMARY ACTIVITY?

_____/_____/_____
Month Day Year

(17) WHAT IS YOUR POSITION AND DEPARTMENT?

e.g. Professor of Chemistry

(18) WHAT TYPE OF STUDENT?

Undergraduate Masters

Doctoral Other _____

(19) IS YOUR SPOUSE IN THE US?

Yes No

Number of dependents _____

(20) HONORARIUMS:

Do you / will you have an office (fixed base) in the USA?

Yes No If yes, how many days in this tax year did you/ will you have the office (fixed base)? _____ Days

(21) COUNTRY OF TAX RESIDENCE IF DIFFERENT FROM FOREIGN RESIDENCE ADDRESS:

Did tax residency end? Yes No If yes, when?

_____/_____/_____
Month Day Year

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

Signature: _____ Contact Tel. No. or E-mail address: _____ Date: _____

FOREIGN NATIONAL INFORMATION FORM (Page 2)

PREVIOUS HISTORY

PLEASE LIST ALL VISA IMMIGRATION ACTIVITY FOR THE LAST FIVE (5) YEARS AND ALL F, J, M, OR Q VISAS SINCE 1/1/85:

Date of Entry	Date of Exit	Visa Type Immigration Status (if on a J-1 Visa)	Subtype of Visa	Primary Activity	Did you use treaty benefits?
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No
					<input type="radio"/> Yes <input type="radio"/> No

HOW TO COMPLETE THE FOREIGN NATIONAL INFORMATION FORM:

- Name: List full name
- Social Security Number: Enter either the social security number issued the US Social Security Administration or ITIN (Individual Taxpayer Identification Number). If you have not received your social security number yet, leave blank.
- Employee/Vendor ID#: Enter the Identification Number issued by the agency for in house operations.
- Local Street Address: List your US mailing address
- Foreign Residence Address: List your permanent residence in your home country.
- Country of Citizenship
- Country that issued Passport: Enter Country that issues the passport not the country where it was issued.
- Passport Number and Expiration Date
- Visa #: The control number in the upper right hand corner of the US visa.
- Original entry to the United States: If you have been to the US before this time, check yes.
- Immigration Status: Check the type of immigration status you currently hold. If you check U.S. Immigrant/ Permanent Resident and have a Permanent Resident card, you may proceed to the bottom of the form, sign and date.
- Specific details for J-1 Visas: Check the appropriate type that matches your DS-2019.
- Actual Primary Activity: Check one activity
- Actual Entry Date into the United States: Must include month, day, and year of the first time ever into the US. Approximate if you don't know.
- Start Date: The start date of your first visa for this primary activity.
- End Date: The projected end date on your visa documentation, i.e.DS-2019 or I-20.
- Occupation: Describe in general the services you are being compensated for.
- Check appropriate box if applicable.
- Is your spouse in the USA?: Check appropriate box. Enter number of dependents in the USA other than spouse.
- Honorariums are Consultants/ Self Employed Individuals: Check the appropriate box. This includes any office at any location specifically identified with you.
- Tax residence is where you last paid taxes as a resident and can be different from legal residence. Do not include the USA.