
Employee Name

Fresno State ID

Highest Level of Education

Institution Name: _____ State: _____

Major: _____ Month/Year Graduated: _____

Gender

Male

Female

Alien Status

(825/X-CCY)

If U.S. Citizen check box to the right, if NOT then complete boxes below.

U.S. Citizen

X - Visa Type: **CC – See Chart for Country Codes**

F Visa type (Non-citizen – student Visa)

Permanent resident (**OOR**) Non-resident (**OON**) _____(MO/YR) exp date

J Visa type (Non-citizen Exchange Visitor) D/S – enter as **9999**

Z Visa type All other types of non-citizen visas (e.g. H-1B, TN) _____

Y – Tax Resident Code:

R – Resident

N – Non-resident

ZZZZ – Work Authorization end date = _____ / _____ (MM/YY)

Veteran Status

Please indicate your status by checking one of the following:

A. Veteran of the Vietnam-era

B. Special Disabled Veteran

C. Other Eligible Veteran

N. NONE of the above

Employee's Signature

Date

Please complete information on reverse side.