



LAWFUL PERMANENT RESIDENCE FORM
for TEACHING POSITIONS

To AVOID DELAY, please review request before submitting.

The following must be completed and submitted to the Office of International Services:

- Submit a request for Lawful Permanent Residence for Teaching through 'Immigration Tracker' Portal.
Complete the LAWFUL PERMANENT RESIDENCE FORM for TEACHING POSITIONS Request Form below.
(Please include a FOAPAL string for OIS filing fee of \$6,620, note this fee includes all pass through USCIS petition fees.)

Name of individual to be sponsored: UIN #:
Department name:
FUND: ORG: BANNER/FOAPAL # ACCT: 141901 PRGM:
Check this box for Optional Premium Processing
(An additional \$1,440 for expedited USDHS processing will be applied to the FOAPAL account above unless otherwise notified.)
Is this a grant fund account? No Yes If yes, the following information must be included*:
Name of PI: Direct phone ext. of PI:
PI's Dept.: PI's Unit:
* Please note: This information is required by the Grants and Contracts office. If this information is not complete the application will be subject to delays.

DEPARTMENT CONTACT INFORMATION

to be completed by department contact representative

Contact's Last Name: First: MI:
Department name:
Title:
Address 1:
Address 2:
City: State: Zip
M/C: Phone: Fax: Email:

1) Is there funding for at least 5 years for this position? Yes No
2) Is this a new position? Yes No
Job title offered: Annual Salary offered:
Number of years and/or months worker has been in this title at UIC?
Does the employer require a second U.S. degree/diploma? Yes No
If "Yes", please indicate the second US degree/diploma and the major(s) and/or field(s) of study required.



Will travel be required in order to perform the job duties? Yes No
If "Yes", please explain the travel requirements.

Non-technical description of job:

DEPARTMENT CERTIFICATION

I certify that the information provided in this Labor Certification application is true and correct.

Print name of Dean / Department Head

Signature of Dean / Department Head

Contact Person for this Petition

Phone

M/C

Contact Person's e-mail address

Fax