



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER™

PERMANENT RESIDENCE
PERMANENT LABOR CERTIFICATION (PERM)
FACULTY AND STAFF
EMPLOYEE CHECKLIST & QUESTIONNAIRE
(FY 2017)

Please return the completed forms and all supporting documents by mail or email to:

TTUHSC Human Resources
International Employment Services
3601 4th Street, STOP 8100
Lubbock, TX 79430
Ph: (806) 743-2865
Email: IES@ttuhsc.edu

CHECKLIST – PERMANENT LABOR CERTIFICATION (PERM)

ONLY ONE CLEAR PHOTOCOPY OF EACH DOCUMENT IS REQUIRED, UNLESS OTHERWISE INDICATED.

- ☐ Fully completed Employee Questionnaire
- ☐ Curriculum vitae (CV)
- ☐ Last diploma received (PhD/Masters/Baccalaureate) and transcripts. Certified English translation of diploma and transcripts, if necessary
- ☐ Academic credential evaluation, for non-US degree(s)
- ☐ Evidence of prior work experience (if prior work experience needed for position) in the form of employment letters confirming the required experience.
- ☐ Current passport biographical data page and page showing passport expiration (if different)
- ☐ Current US non-immigrant visa (if physically present in USA)
- ☐ Current [I-94 document](#)
- ☐ All Forms I-797 - USCIS approval of previous applications or petitions relating to your status in the U.S.

If you currently have a J-1 or J-2 visa/status, also include:

- ☐ Copy of I-612 approval notice showing §212(e) waiver
- ☐ Copy of all IAP-66, DS-2019 documents

If you currently have an F-1 or F-2 visa/status, also include:

- ☐ Copy of all I-20 documents
- ☐ Copy of EAD (Optional Practical Training - OPT) card

If you are a Medical Resident, Clinical Fellow, or Physician also include:

- ☐ Scores for USMLE Steps 1, 2 and 3
- ☐ ECFMG Certificate
- ☐ Copy of State Medical License
- ☐ Copy of Residency/Fellowship Completion Certificate
- ☐ Evidence of Board Certification or Board Eligibility

EMPLOYEE QUESTIONNAIRE - PERM

Please answer all questions completely to avoid delays. If the answer to a question is NONE or NOT APPLICABLE, please state 'None' or 'N/A'. Do not leave any blanks. Type onscreen or print clearly.

Name: (Last, First, Middle)	
Home Address & Telephone Number:	Ph:
All Other Names Used:	
E-mail Address:	
Date of Birth:	
Country of Birth:	
Country of Citizenship:	
City/Province of Birth:	
Social Security No.:	
'A' Number (if any):	
Passport Number:	
Passport Issue Date:	
Passport Expiration Date:	
Current Visa Status:	
Foreign Address:	
Are you currently in Removal Proceedings (exclusion or deportation proceedings):	<input type="checkbox"/> Yes <input type="checkbox"/> No
Preferred US Consulate	

Employee Signature: _____ Date: _____

EMPLOYMENT HISTORY - PERM

Provide employment history since completing highest degree. Start with the current employer (TTUHSC).

EMPLOYER NAME DEPARTMENT/OFFICE CITY/STATE/COUNTRY	DATES OF EMPLOYMENT	SUPERVISOR NAME SUPERVISOR JOB TITLE SUPERVISOR TELEPHONE NUMBER

Employee Signature: _____ Date: _____

EMPLOYEE FAMILY CHECKLIST & QUESTIONNAIRE

Each family member, even those NOT seeking permanent residence status, must be listed below. US citizen children should also be listed. Please add additional sheets if necessary. Please answer all questions completely to avoid delays. If the answer to a question is NONE or NOT APPLICABLE, please state 'NONE' or 'N/A'. Do not leave any blanks. Type on-screen or print clearly.

Spouse's Full Name: (Last, First, Middle)	
Country of Birth	
Country of Citizenship	
Date of Birth:	

Child #1 Full Name: (Last, First, Middle)	
Country of Birth	
Country of Citizenship	
Date of Birth:	

Child #2 Full Name : (Last, First, Middle)	
Country of Birth	
Country of Citizenship	
Date of Birth:	

Child #3 Full Name: (Last, First, Middle)	
Country of Birth	
Country of Citizenship	
Date of Birth:	

Employee Family Member Signature: _____ Date: _____