

Unit Checklist for Extension of H-1B Petition

- () 1. Unit submits continuation of appointment form and Request to File *Extension* of H-1B Petition (see attached). *Following receipt of these forms, AgCenter HRM will file the Labor Condition Application. While that application is being filed, the unit should complete Steps 2 and 3. Extensions should be requested 45 days to 6 months prior to expiration of the previous petition.*

- () 2. Prepare and/or obtain the following documents which later will accompany the actual visa petition.
 - () a. Ensure that employee has a valid passport and provide a copy of the document to the AgCenter HRM Office.
 - () b. Provide a copy of both sides of employee's most recent I-94 form and copy of current passport.
 - () c. Institutional support letter stating the reasons for extension of H-1B visa is required - *See sample letter.*
 - () d. Secure check or money order from employee in the amount of \$320.00 made payable to Department of Homeland Security to cover the petition fee.

- () 3. Forward the above items to the AgCenter HRM Office for review and for preparation of the final draft of Form I-129 (Petition for Nonimmigrant Worker). Unit may submit items from # 2 at the same time as the initial request for extension.

- () 4. The unit will be notified when the Labor Condition Application is approved. *AgCenter HRM will obtain additional required signatures and mail the complete petition package to the U.S. Citizenship and Immigration Services (USCIS). Approval generally can be expected 16 to 24 weeks thereafter.*

- () 5. **NOTE: If an extension of stay is required for the employee's family member(s), the following items must also be submitted:**
 - () a. Form I-539 may be printed off the USCIS website (www.uscis.gov) and must be completed by the oldest dependent.
 - () b. Secure another check or money order to cover the \$300.00 base fee for dependents (a separate check is required for dependent applications).
 - () c. Provide copies of both sides of all I-94 forms.
 - () d. Provide copies of all passports.





REQUEST TO FILE EXTENSION OF H-1B PETITION

Employee Name _____

ID # _____ Unit _____

Title _____ Position # _____

Salary _____ Proposed Period of Extension _____

IT IS EXTREMELY IMPORTANT THAT THIS SECTION BE COMPLETELY ACCURATE. PLEASE OBTAIN INFORMATION DIRECTLY FROM THE EMPLOYEE.

Date of Last Arrival in U.S. ____/____/____ Most Recent Form I-94# _____

Are there dependents who must apply for extension of H-4 status? ()YES - contact HRM for application ()NO

List the employee's and any dependents' prior periods of stay in H classification in the U.S. for the last six years. (Do not include dates when the individual(s) were not present in the U.S.) _____

Does employee & any H-4 dependents have a valid passport? () YES (attach copy) () NO (explain below) _____

Proposed Source of Funds (check all that apply): ()State ()Federal ()Grant

Description of job duties _____

Please note that, prior to any change in the above duties, location of work, or pay other than routine increases, you must contact Torii Freeman in Human Resource Management to determine whether or not an amendment to the H-1B petition must be filed before actually making the proposed change(s).

I hereby request that procedures for an extension of H-1B visa petition be initiated for the above employee. I understand that by filing this petition I am agreeing to the following conditions and will provide any funds associated with complying with these conditions.

The actual or prevailing wage rate for the position, whichever is higher, must be paid (required rate to be determined by the Ag Center Human Resource Management Office).

The actual and prevailing wage rates must be updated every two years (by the Ag Center HRM Office) and the employee's salary must be increased to the new actual/prevaling wage rate if it is higher than the employee's salary at that time.

Reasonable costs of return transportation of the alien abroad must be paid if the alien is dismissed from employment by the employer before the end of the period of authorized stay.

Unit Head Signature Date
APPROVAL (REQUIRED FOR APPOINTMENTS FROM APPROPRIATED FUNDS):

Vice Chancellor & Director Date

*Attach PER-2 or EZ Form continuation to continue the employee for the period to be covered by the H-1B extension.

**FORMAT FOR INSTITUTIONAL SUPPORT LETTER
FOR EXTENSION OF H1B PETITION**

Date

U.S. Citizenship and Immigration Services
California Service Center
ATTN: Cap Exempt H-1B Processing Unit
P.O. Box 30040
Laguna Niguel, CA 92607-3004

Regarding: Extension of H-1B status for *Employee Name*

This letter is to request extension of H-1B status for *Employee Name, Job Title*, for the period *Month 1, 20XX* through *Month 30, 20XX* at a salary level of *\$XX,XXX* per year. Our original petition was for the period *Month 1, 20XX* through *Month 30, 20XX* only, due to funding restrictions. We have recently received contract funds to continue this project through *Month 30, 20XX*.

Employee name is responsible for assisting in research on _____.
(Use this paragraph to elaborate on the duties of the employee and the overall impact or purpose of the research.)

The types of work experience and training of *Employee Name* make *him/her* uniquely qualified to perform these duties. *He/She* has work experience with _____. (Briefly describe the employee's overall relevant work experience.)

Continued employment of *Employee Name* will allow us to complete _____. (Indicate the basic phase, project, or area of research being completed.)

Favorable consideration of this petition will be appreciated.

Sincerely,

Immediate Supervisor or Unit Head