



Permanent Residency Process Authorization Form

Request for: **EB-1:** Outstanding Research/Outstanding Professor
EB-2: Research Faculty (Research Professor + Research Scientist Tracks) (Regular PERM)
EB-2: Position includes teaching duties (Special Handling PERM)
EB-3: Professional, Skilled, or Unskilled Workers

Sponsoring Department: _____
Department Administrator: _____
Administrator Email Address: _____
Administrator Phone Number: _____
Department Group (School, College or other higher-level organization): _____
Employee's First Name: _____ Last Name: _____ Middle Name: _____ Panther ID: _____
Full Time Employment Start Date: _____ Current Immigration Status: _____ Date Status Expires: _____
Position/Title for which sponsorship is sought: _____ Job Code: _____

Department Chair/Business Unit Head Approval:

By signing this form, I give permission for the Academic Affairs and Human Resources to begin the process of obtaining an immigrant visa (permanent residence) for the employee named above, under these conditions:

1. The position offered to the alien is a regular, full-time University position and fits the U.S. Citizenship and Immigration Services' (USCIS) description of a "permanent" position. Permanent means either tenured, tenure-track, or for a term of indefinite or unlimited duration in which the employee would ordinarily have the expectation of continued employment.
2. Academic Affairs and Human Resources cannot guarantee the outcome of any case, and the Hiring/Sponsoring Department have not made and will not make any such guarantees to the employee.
3. The Hiring/Sponsoring Department must pay all the fees (Legal Fees and Advertising Fees) associated with the PERM (Program Electronic Review Management) application.
4. In any situation that the Office of the Provost Planning & Finance receives invoices from retained law firm, I authorize the **Department's Activity #** _____ to be charged by the Office of the Provost Planning & Finance

Department Chair (For Faculty Position)

Signature: _____ **Print Name:** _____ **Date:** _____

Business Unit Head

Signature: _____ **Print Name:** _____ **Date:** _____

Please email the completed form to immigration@fiu.edu