O-1 Extraordinary Ability Department Sponsorship Request Form

Instructions:

This form is used to request that the DGSOM Visa and Licensing Office file an O-1 petition for a prospective or current employee at UCLA. It is essential that all information entered in this request is accurate. This information will be used to prepare the O-1 petition.

Type of O-1 Requested:	New O-1. Please include a one-tin \$400.00 using a Rechar	ne Review Fee of •ge Request Form (P39).
	O-1 Extension	Concurrent O-1

Section 1: Beneficiary Information			
Last Name:			
First Name:			
Date of Birth: (MM/DD/YYYY)			
Gender:			
	Male	Fer	nale
Section 2: Appoint	ment Information	1	
Department:			
Title of Position being offered:			
Annual Salary:			
Step:			
Start Date:			
End Date:			
Is this a tenure track position:			
	Yes	Ν	0
Source of funds for this position:			
UCLA Account Number/ Fund Number:			
If grant funded, expiration date of grant(s):			
Name of Principal Investigator:			
Brief description of job duties:			
Minimum qualifications required to pe	rform the duties/	tasks of this posi	tion:
Minimum Degree(s) required:			
	Master's	Doctorate	Other
Field(s) of study required for the position:			
State license or certificate required:			
	Yes	No	
Absolute minimum number of years of			
employment experience required for the position:			
Position's minimum required training and			
experience (other than that which would or could			
have been obtained during the normal course of			

UCLA David Geffen School of Medicine

Visa and Licensing Office

the degree program listed above). Please	
quantify required training and experience in	
number of months/years (if none please write	
none):	

Section 3: Certified and Approved

By signing below, the hiring Department of UCLA's David Geffen School of Medicine certifies that the Department assumes full responsibility for sponsorship of the foreign national for O-1 nonimmigrant visa status based on its offer of temporary employment in the United States.

The Department also certifies that it will comply with all U.S. Citizenship and Immigration Services ("USCIS") laws relating to sponsorship of a foreign national for O-1 nonimmigrant status. Additionally, the Department affirms that all legal fees and associated costs incurred in this case are the sole responsibility of the Department, and the Department agrees to use an attorney selected by the DGSOM Visa and Licensing Office.

Finally, the Department understands that the Assistant Director of the DGSOM Visa and Licensing Office is the only approved signatory for petitions related to this case and we will not sign such petitions, nor will we sign a Notice of Entry as Appearance as Attorney (Form G-28).

Division Chief Name:	
Division Chief Signature:	
Date:	
Department Chair Name:	
Department Chair Signature:	
Date:	

Endorsed by: Joan Grace R. Cerera Assistant Director, Visa and Licensing Office

Approved by: Dr. Joaquin Madrenas, M.D., Ph.D.	
Vice Dean for Faculty, DGSOM	

Checklist:

- □ Visa Office Review Fee of \$400.00 using a Recharge Request Form (P39) for New O-1 Petition
- □ Export Control Certification
- □ Letter of Request for O-1 Sponsorship printed unto the requesting Department's letterhead signed by the Department Chair. Please contact the Visa and Licensing Office Assistant Director for the letter template, if needed.