

**Print Name:** 

## **Employment Change Notification**

To be completed when requesting a change to the employment (including a transfer to another UM department) of an employee in H-1B, TN, E-3 or O-1 status.

Employee Name:	Employee UMID:
Proposed Job Title:	Proposed Salary:
New Hiring Dept.:	U-M Posting No:
Dept. Administrator:	Dept. Phone:
POSITION MINIMUM REQUIREMENTS	
**In this section please provide the MINIMUM requirements for the POSIT.	ION, <u>not</u> the qualifications of the potential employee**
Required education: BA/BS MS PhD DDS	
Experience required (# of years & type):	
Other requirements, if applicable:	
<ul> <li>→ Please attach the following:</li> <li>→ Brief job description. Please be specific but use layman's terms.</li> <li>→ U-M job posting (if available)</li> <li>→ Actual Wage Form for the new position</li> </ul>	
Is the position full-time? ☐ Yes ☐ No Hours per week:	
Period of requested H-1B employment (maximum initial period of 3 years or less	SS): From: To:
Address where employee will work:	
Will the employee work at any locations outside of the University of Michigan? ☐ Yes* ☐ No *If yes, please attach an explanation including location, anticipated duration, and frequency.	
Signature:	Title:

Please email completed form to <a href="mailto:icfacultystaff@umich.edu">icfacultystaff@umich.edu</a>

Date:

The specialist reviewing this change notification will analyze whether the details of this new position are substantially similar to those listed on the foreign national employee's prior work authorization application and will contact you to confirm whether an amendment filing is necessary.