WVU Tax Services
Instructions for Foreign National Performing Services
Outside of the United States
Requesting Access to WVU Systems

1. WVU Department/EBO for whom the Foreign National will be working should complete the Department Request form and submit to the WVU Tax Services Unit. This form can be found on-line at TaxServices.wvu.edu. A Service Agreement form should also be submitted at this point if needed.

2. Department/EBO should begin the process a minimum of two weeks prior to date that access is needed.

3. WVU Tax Services will then contact the individual via e-mail and request the following information (all forms to be completed will be provided by Tax Services):
   - Completed Foreign National Information Form for an Individual Outside the US
   - Completed Information Statement form
   - Copy of a valid passport
   - Copy of other identifying documents such as a valid driver’s license, school/institution issued picture identification card, other State/Country issued form of identification, birth certificate, etc.

   **Two forms of identification will be required – example passport and driver’s license**

4. Upon receipt of the completed forms, WVU Tax Services Unit will review and enter the information into the Windstar database. The individual will be considered a non-Payroll individual. There will be no need to obtain employment forms (W-4, State tax withholding forms). Entering the information into the Windstar database is for our information and tracking.

5. WVU Tax Services will maintain a file of all Foreign Nationals performing services outside the United States.

6. Notification will be submitted to WVU OIT who will grant or deny the requested system access.
Dear WVU Affiliate -

WVU Tax Services has received notification from a Department within the University that you will be working with WVU on a project and are in need of access to our systems. Please complete the attached forms and return them along with copies of the requested documentation to the WVU Tax Services Unit. All information can be submitted via e-mail, fax or mail to the following address:

E-mail: Tax@mail.wvu.edu

Fax: (304) 293-7266
Attention: Tax Services

Mail: WVU Tax Services
PO Box 6005
Morgantown, WV 26506

Access cannot be granted until you have submitted the requested documentation. Feel free to contact us via e-mail or at (304) 293-3379 extension 3 if you have any questions.

Sincerely,
Melissa D. Hunt, MBA, CICA
Assistant Director
WVU Tax Services
WEST VIRGINIA UNIVERSITY
FOREIGN NATIONAL INFORMATION FORM – INDIVIDUAL IS OUTSIDE U.S.

(1) LAST NAME: ___________________________ FIRST: ___________________________ MIDDLE: _____________

(2) SOCIAL SECURITY # ___________________________ (3) WVU ID # ___________________________ (4) BIRTHDATE: _____________
(MM/DD/YYYY)

(5) RESIDENCE ADDRESS:

__________________________________________________________________________

City: ____________________________________________ Province/Region: ____________________________
Postal Code: ____________________________ Country: __________________________________________
E-Mail Address: ____________________________________________ (including Country code)
Telephone Number: ____________________________________________ Other Contact Information: ________________

(6) Country of Citizenship: ____________________________________________

Please provide at least 2 forms of identification. Please complete information below and provide copies of all identification documents. A passport with a second form of identification is preferred. If you do not have a valid passport, please provide two other forms of identification.

Accepted forms of identification –

• Valid passport
• Valid driver’s license
• Government issued identification card
• Military issued identification card
• School or Educational Institution issued identification card
• Employer issued identification card
• Birth Certificate

(7) Passport #: ____________________________ (8) Passport Expiration Date: _____________
(MM/DD/YYYY)

(9) Country That Issued Passport: ____________________________________________

(10) Form of Identification: (example – driver’s license) ____________________________ (11) Identification Number: ____________________________
(12) Issuing Authority: ____________________________________________ (13) Expiration Date: ____________________________

(14) Form of identification: ____________________________________________ (15) Identification Number: ____________________________
(16) Issuing Authority: ____________________________________________ (16) Expiration Date: ____________________________

I hereby certify that all of the above information is true and correct. I understand that if my status changes or if I would begin performing services for West Virginia University physically in the United States that I would need to notify the WVU Tax Services unit immediately.

Signature: ____________________________ Date: ____________________________

Please return all forms and copies of documentation to:
Tax@mail.wvu.edu or via mail to
West Virginia University
Tax Services
One Waterfront Place, 3rd Floor
PO Box 6005
Morgantown, WV 26506-6005
WVU Tax Services
Information Statement to be Completed by Foreign National Performing Services **Outside** the U.S.

Please provide a detailed description of the service to be performed for West Virginia University:


Please provide the time period you will be performing these services:

From:
To:

I, ____________________________ (name), certify that I am neither a U.S. citizen nor a permanent resident alien, and all of the services I will be or are performing for West Virginia University will not be performed in the United States. These services will primarily be performed in ____________________________ (country). I also certify that I understand I am not considered an employee of either the State of West Virginia or West Virginia University and am therefore not entitled to any employee benefits including medical insurance or retirement benefits.

______________________________
Printed Name

______________________________
Signature

______________________________
Date