UNT Health FORT WORTH

Instructions: The purpose of this form is to allow the International Services Office to pay for H-1B filing fees using a Procurement Card, which will later be allocated to the Charts of Account provided below. *UNT Health funds cannot be used for dependent (spouse or children) related costs.* All H-1B related costs are required to be paid by the hosting department.

Part 1: Employee & Department Information	
Name of Employee (Last Name, First Name):	
Title of Employee:	Employee ID:
Sponsoring Department:	
Department Contact (Name & E-mail):	
Charts of Accounts for Petition Costs:	
Charts of Accounts for Express Mail/FedEx Fees:	

Part 2: Agreement to Pay Indicated Fees Please specify below the fees to be paid by the sponsoring department.
H-1B Specialty Occupation Fees (Filing fee & Anti-Fraud fee payment is required by department) ☐ Filing Fee: $460 ☐ Anti-Fraud Fee: $500 (required for the initial UNT Health petitions i.e. not required for amendment or extension petitions) ☐ Premium Processing Fee (Optional): $2,965

Part 3: Certification of Acknowledgement	
By signing below I agree to pay the indicated filing fees, from appropriate unrestricted funds that have been designated for this purpose. I certify that I have amount listed above budgeted for this reason.	
Name of Supervisor/PI:	
Supervisor/PI Signature:	Date:
Name of Dept Head/VP:	
Dept Head/VP Signature:	Date:
Name of Business Manager:	
Business Manager Signature:	Date: