

Immigration Case Management (ICM)

Power User Series

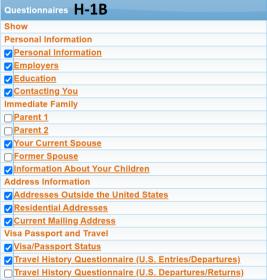
ICM is highly customizable and this extends to system default questionnaires. Questionnaires can be modified for each process type to better suit your organizational needs.

Note: The following may only be performed by a user with administrative privileges. If you are unable to proceed through the steps, please contact your administrator for assistance.

Customize Questionnaires for H-1B Process

To customize the default questionnaire:

- 1. Click on the username displayed in the upper right of the page and select **Administrative Settings** from the dropdown.
- 2. In the Firm Administration module, click the **Processes** tab.
- 3. Click the **Default Questionnaires** tab.
- 4. The left hand side of the page will display all of the Questionnaires that are available.
- 5. Click the dropdown arrow in the **Selected Process** section and select the H-1B process.
- 6. From the Questionnaires section, use the checkbox in the **Show** column to include or remove Questionnaires for the selected process. Below is our recommendation for the H-1B process.



- 7. Clicking the name of each questionnaire will display all of the questions associated with it. **See our recommendations** for the H-1B individual questionnaires on Pages 2 and 3.
- 8. Use the checkbox in the **Hide** column to hide the questions you don't want displayed.
- 9. Click **Update Info** to save changes.

Personal Information		Employers				Education			
Hic	leEnglish Label		Hide	English Label		Hid	eEnglish Label		
	Family Name(s): Family Name(s) (Correction):			S					
	First Name:			Company					
	First Name (Correction):			Street Number and Name:					
	Middle Name(s):		_						
	Maiden Name:			Address line 2:			School:		
	Nickname: All Other Names:			Number:			In the US?:		
	Gender:			Type:			Street Number and		
	Date of Birth:			Apartment:			Name:		
	Nationality(ies):								
	Country(ies) of Citizenship: City or Town of Birth:			Suite:			Address line 2:		
	Country of Birth:			Floor:			Type:		
	Birth State/Province:			City:			Apartment:		
	A-Number (if any): Current Visa or Immigration Status:			Country:			Suite:		
	U.S. Social Security Number:								
	Date Status Expires:			State/Province:			Floor:		
~	I-129S Expiration Date:			Zip/Postal Code:			Number:		
✓	Driver's License No: Driver's License Expiration Date:			Business Type:			City:		
	Marital Status:			Job Title :			-		
~	Long term domestic partner:						Country:		
~	Date of Marriage:		✓	Annual Salary:			State/Province:		
~	Place of Marriage: Any additional information:			Hours Worked per Week:			Zip/Postal Code:		
✓	Student and Exchange Visitor Information System			From:			-		
	(SEVIS) Number:		_				Degree:		
□	Employment Authorization Document (EAD) Number: First Entry into the U.S.:			То:			Highest level of		
	I-94 Entry Date/Issue Date:			Employment Status:			education:		
~	I-94 Expiration Date:			Internship?:			Field of Study:		
~	I-94 Number: I-94 Entry Status:			In the US?:		~	From:		
✓	Most Recent I-94 Record:					_	_		
	I-94 Entry Date/Issue Date:			Employer Phone Number:		✓	То:		
	I-94 Expiration Date:			Supervisor's Name:		✓	Date Graduated:		
	I-94 Number: I-94 Entry Status:		~	Job Duties:			Date Degree Awarded:		
	Management Information:						3		
~	Work Address:								
~	Manager:								
✓	Manager Phone #: Manager Email:								
Z	Department:								
~	Department/Group:								
~	Department Number:								
✓	Cost Center: Client Billing Code:								
	Salary:								
	Employee ID:								
~	Biographic Information								
	Ethnicity:								
	Race:								
	Height: Weight:								
	Eye Color:								
	Hair Color:								
* -	Fields are read-only due to being repeated								

Conta	cting You	Visa/Passport Status	Travel History Questionnaire			
Hide	English Label	HideEnglish Label ☐ Foreign Passport Information	Hide English Label			
	By E-mail	□ Date of Issuance: □ Passport Expiration Date:	Initial Entry to the United States First Entry Date:			
	E-mail:	Passport Number: Issuing Country:	☐ I-94 Number:			
	By Telephone Home Telephone:	☐ City Issued in: ☐ State/Province Issued in:	Name as printed on I-94:I-94 Expiration Date:			
	Work Telephone:	Country Issued in: U.S. Passport Information	✓ Location Stayed:			
	Daytime Telephone:	U.S. Passport Number: Place Issued:	U.S. Port of Entry (City/State):✓ By means of:			
	Cellular Telephone:	Date Issued: U.S. Passport Expiration:	☐ Entry Status: ✓ Inspected by U.S. Immigration Officer?:			
~	Pager:	☑ Permanent Residence Status	Inspected by U.S. Immigration Officer?:Admitted to the US?:			
✓	Home Fax: Business Fax:	☑ Date of Admission/Adjustment:☑ Method of attaining Permanent Residency:	☐ U.S. Entries/Departures			
	Buomoco Fux.	✓ Place of Admission or Adjustment:	□ Beneficiary's Entry Information□ Departure Information			
		Visa InformationNonimmigrant Visa Number: Visa Issue Date:	Departure InformationU.S. Entry Date✓ **EOS/COS Issuance Date			
		 Visa Expiration Date: Consulate that issued Visa: Have you ever been in J-1/J-2 status, and subject to a 	I-94 Number:			
		two-year foreign residence requirement?: Have you ever been granted a waiver of the two-year foreign residence requirement?:	I-94 Expiration Date: Entry Status: ✓ Inspected Admitted Yes			
			Inspected Admitted Location Stayed:			
			U.S. Port of Entry			
			U.S. Departure Date			
			✓ Destination			
			Reason for TripU.S. Port of Departure			