Return your completed form to the Payroll Department (Alien Desk), 1225 E. 60th St., Rm. 321, Chicago, IL 60637
SUPPLEMENTARY PAYROLL QUESTIONS:
(Check appropriate boxes below and supply requested information.)

A. Current Visa classification:
   - ☐ F-1 Student
   - ☐ F-1 Practical Trainee
   - ☐ J-1 Student
   - ☐ J-1 Practical Trainee
   - ☐ Other: _______________________________

   Date you received visa classification: _______________________________
   Date of visa expiration: __________________________________________

B. Have you already claimed exemption under the Tax Treaty Article 20(1) in the current calendar year?
   - ☐ YES.
   - ☐ NO.

   Have you ever claimed exemption under the Tax Treaty Article 20(1) in previous years?
   - ☐ YES. (List the calendar years you claimed the exemption. __________________________ )
   - ☐ NO.

C. Were you ever a student at another U.S. educational institution obtaining education, training, or special technical experience?
   - ☐ YES. (List the name of the educational institution. ___________________________
     and list the date of graduation, if appropriate. __________________________ )
   - ☐ NO.

POLICIES REGARDING TAX TREATY EXEMPTIONS AT THE UNIVERSITY

You are eligible for the GERMANY treaty exemption for two years beginning on the date of your arrival in the U.S. It is your responsibility to maintain the appropriate, unexpired, “employment-authorized” visa classification during the period that you are receiving the benefits of this tax treaty exemption and employed at the University.

Should you exceed the two-year period of exemption and you notice that no Federal or State tax has yet been withheld from your paycheck, it is your responsibility to inform the Payroll Department immediately, (773) 702-5989.

You must complete the Form 8233 and 87-9 Revenue Procedure Statement for each calendar year (or portion of the calendar year) in which you claim the tax exemption. You are also required to file the appropriate tax return at calendar year-end.

Please certify your acknowledgment of the policies presented above by signing below.

SIGNATURE

CONTACT PHONE NUMBER: