

CHECKLIST

ST INTERNATIONAL SCHOLARS ON TREATY

FELLOWSHIP OFFICE

- _____ SIGNED SAO AWARD LETTER
- _____ ACADEMIC APPOINTMENT FORM
- _____ STATEMENT OF INTENTION TO FILE
- _____ TAX-VISA QUESTIONNAIRE
- _____ W8-BEN FORM
- _____ RESIDENCY FORM
- _____ CFA EMAIL ACCOUNT NOTIFICATION TO FELLOWSHIP COORDINATOR
- _____ SIGNED REPATRIATION INSURANCE FORM
- _____ COPY OF APPLICATION LETTER FROM SOCIAL SECURITY OFFICE

FOR CAREFIRST ENROLLEES

- _____ SUBMIT CAREFIRST ENROLLMENT FORM
- _____ CAREFIRST HEALTH CARD RECEIVED
- _____ CALL CAREFIRST AT (800) 321-3497 - FOR HEALTH CARD (IN 2 WEEKS)

DIVISION ADMINISTRATOR

- _____ SUBMIT ELECTRONIC FUNDS TRANSFER (EFT) FORM
- _____ SUBMIT RELOCATION RECEIPTS TO DIVISION ADMINISTRATOR

OTHER OFFICES

- _____ MEET WITH HUMAN RESOURCES
- _____ GO TO HOLYOKE CENTER FOR SAO ID
- _____ APPLY FOR LIBRARY PIN NUMBER AND PRIVILEGES WITH HARVARD ID NUMBER
- _____ SET UP LOCAL BANK ACCOUNT