Form W-7
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Application for IRS Individual Taxpayer Identification Number

For use by individuals who are not U.S. citizens or permanent residents. Go to www.irs.gov/FormW7 for instructions and the latest information.

OMB No. 1545-0074

An IRS individual taxpayer identification number (ITIN) is for U.S. federal tax purposes only. Before you begin:										Application type (check one box): Apply for a new ITIN			
• Don't submit this form if you have, or are eligible to get, a U.S. social security number (SSN).								l	Renew an existing ITIN				
Reason you're submitting Form W-7. Read the instructions for the box you check. Caution: If you check box b, c, d, e, f, or g, you must file a U.S. federal tax return with Form W-7 unless you meet one of the exceptions (see instructions).													
a Nonresident	alien re	equired to get an ITIN to cla	im tax treat	y benef	fit (you r	nust also che	eck and c	omplete bo	ox h (see instru	ctions))			
		ling a U.S. federal tax return		-					•	,,			
	c U.S. resident alien (based on days present in the United States) filing a U.S. federal tax return												
_	nt of U.S. citizen/resident alien												
e Spouse of U	.S. citiz								en (see instruct				
		J											
	f Nonresident alien student, professor, or researcher filing a U.S. federal tax return or claiming an exception (if claiming an exception, you must also check and complete box h (see instructions))												
g Dependent/spouse of a nonresident alien holding a U.S. visa													
h 🔯 Other (see instructions) Exception 2(b) scholarship/fellowship income													
Additional information for a and f : Enter treaty country Foreign Country and treaty article number ##													
Name	lame 1a First name Middle na					name Last			name				
(see instructions)				the					Shark				
Name at birth if different	1b F	irst name		Middl	le name	· · · · · · · · · · · · · · · · · · ·		Last	name				
Applicant's	2 S	Street address, apartment no	umber, or ru	ıral rout	te numb	per. If you ha	ve a P.O.	box, see	separate instr	uctions.			
Mailing		3300 S. University Drive, Box #123 *use a local address that will be valid for a long time											
Address	С	City or town, state or province	ce, and cou										
· · -		Fort Lauderdale, FL 3	3328							_			
Foreign	3 S	3 Street address, apartment number, or rural route number. Don't use a P.O. box number.											
(non-Ŭ.S.)		1234 Foreign Street											
Address	С	City or town, state or province	ce, and cou	ntry. Inc	clude po	ostal code wi	here appre	opriate.					
(see instructions)		Foreign City, State											
Birth	l	Date of birth (month / day / y		ntry of b		City and state or province (optional) 5 Male							
Information		mm / dd / yyyy			Count			eign City,			Female		
Other	l	6a Country(ies) of citizenship 6b Foreign tax I.D. num							a (if any), numb		piration date		
Information	Foreign Country 123456789					F1, 01010101, mm/dd/yyyy							
	l <u> </u>	dentification document(s) su	•	•		_		_		ents, see ir	nstructions)		
			s license/St	ate I.D.		USCIS doc	umentatic	on 🗌	Other				
	ls.	Issued by: Foreign Country Number: 123456789 Exp. date: mm/dd/yyyy Date of entry into the United States (MM/DD/YYYY): mm/dd /yyyy											
-									(IVIIVI/DD/YY	1 1). 11111/	/ y y y y		
		lave you previously received		an Inte	rnal Re	venue Servic	e Number	r (IHSN)?					
	X No/Don't know. Skip line 6f. Yes. Complete line 6f. If more than one, list on a sheet and attach to this form (see instructions). 6f Enter ITIN and/or IRSN ITIN												
}													
	and name under which it was issued										لــالــالــا		
	First name Middle name Last name 6g Name of college/university or company (see instructions) Nova Southeastern University												
ŀ													
		City and state Fort Laude						h of stay 5					
Sign	Under p	penalties of perjury, I (applicant	t/delegate/acc	ceptance			ave examin	ned this appl	lication, including				
Here	docume	entation and statements, and to ation with my acceptance agent	o the best of r	my know	vledge an	nd belief, it is tr W-7, Applicatio	rue, correct on for IRS I	t, and compl ndividual Ta	ete. I authorize th	ne IRS to sha	are		
Keep a copy for	Signature of applicant (if delegate, see instructions)				Date (month / day / year) Phone			e number	e number				
our records.	Signature Here					, , , , , , ,			local phone number				
	Name	Name of delegate, if applicable (type or print)				Delegate's relationship to applicant							
					☐ Parent ☐ Power of attorney ☐ Court-appointed guardian								
tocoptanico	Signature				Date (month / day / year) Phon			<u>e</u>					
Agent's	Name and title (to see an arint)				<u></u>	/	/	Fax					
Use ONLY	Name	and title (type or print)			Name (of company	ļ	EIN		PTIN			
								Office co	de				