

**I. PERSONAL INFORMATION**

1. Name (Family Name, First Name, Middle Name)

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2. Sex (Male or Female) \_\_\_\_\_

3. Date of Birth (Month, Day, Year) \_\_\_\_\_

4. Place of Birth (City or Town, Province or State, & Country)

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5. Country where your passport was issued \_\_\_\_\_

6. Address in Home Country (No. & Street, Apt. No., City or Town, Province, Country)

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7. Current Address

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8. Telephone Number ( ) \_\_\_\_\_ - \_\_\_\_\_

Work or Alternate Telephone Number ( ) \_\_\_\_\_ - \_\_\_\_\_

9. Fax Number ( ) \_\_\_\_\_ - \_\_\_\_\_

10. E-mail address \_\_\_\_\_

11. Social Security Number (If None, Write "None") \_\_\_\_\_

12. Occupation or Profession \_\_\_\_\_

13. Have you ever been arrested? (If yes, please attach an explanation)

No \_\_\_\_\_ YES \_\_\_\_\_

**II. MARITAL STATUS**

(PLEASE CIRCLE ONE)

SINGLE (NEVER MARRIED) | SEPARATED | ENGAGED | MARRIED | WIDOWED | DIVORCED |

*IF MARRIED*

1. Name of Spouse (Family Name, First Name, Maiden Name)

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2. Date of Birth (Spouse) (Month, Day, Year) \_\_\_\_\_

3. Place of Birth (Spouse) (City or Town, State or Country)

\_\_\_\_\_

4. Spouse's Passport Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Country of Issue \_\_\_\_\_

5. Is your Spouse a Permanent Resident? (Yes or No) \_\_\_\_\_

If YES: Give Date (Month, Day, Year) and Place of Permanent Residence (City, State or Country)

\_\_\_\_\_

\_\_\_\_\_

What is your SPOUSE'S Alien Registration No. \_\_\_\_\_

6. Is your SPOUSE a U.S. Citizen? (Yes or No) \_\_\_\_\_

If YES, By Birth or By Naturalization \_\_\_\_\_

On (Date) \_\_\_\_\_ At (Place) \_\_\_\_\_

### III. FAMILY INFORMATION

1. Number of Children \_\_\_\_\_

FOR ALL YOUR CHILDREN:

NAME, SEX, PLACE OF BIRTH, DATE OF BIRTH, NOW LIVING AT

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

MEMBERS OF YOUR FAMILY WHO WANT TO ENTER THE USA WITH YOU:

NAME, RELATIONSHIP

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**IV. ADDRESSES**

**1. RESIDENCES LAST FIVE YEARS (LIST PRESENT ADDRESS FIRST)**

(STREET & NO., APT.#, CITY, STATE, COUNTRY, FROM (MONTH/YEAR), TO (MONTH/YEAR))

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**V. VISA INFORMATION**

1. Have you ever applied for an Immigrant or Nonimmigrant U.S. Visa before?

No \_\_\_\_\_ YES \_\_\_\_\_

WHERE? \_\_\_\_\_ WHEN? \_\_\_\_\_

\_\_\_\_\_ VISA WAS ISSUED

\_\_\_\_\_ VISA WAS REFUSED

TYPE OF VISA? \_\_\_\_\_

2. Has your U.S. Visa ever been canceled?

No \_\_\_\_\_ YES \_\_\_\_\_

3. (a) Has anyone ever filed an Immigrant Visa petition on your behalf?

(b) Has Labor Certification for Employment in the U.S. ever been requested by you or on your behalf?

(c) Have you or anyone acting for you ever indicated to a U.S. Consular or Immigration Employee a desire to immigrate to the U.S.?

(a) NO \_\_\_\_\_ YES \_\_\_\_\_

(b) NO \_\_\_\_\_ YES \_\_\_\_\_

(c) NO \_\_\_\_\_ YES \_\_\_\_\_

4. Are any of the following in the U.S.? (If YES, Circle Appropriate Relationship and indicate what that person is doing in the U.S., I.E., STUDYING, WORKING, ETC.)

HUSBAND/WIFE \_\_\_\_\_

FIANCE/FIANCEE \_\_\_\_\_

FATHER/MOTHER \_\_\_\_\_

SON/DAUGHTER \_\_\_\_\_

BROTHER/SISTER \_\_\_\_\_

IF YOU ARE PRESENTLY IN THE U.S., PLEASE ANSWER THE FOLLOWING:

5. Date you last entered the U.S. (Month, Day, Year)\_\_\_\_\_

6. Type of Visa with which you entered: (Circle One)

B-1 | B-2 | C-1 | D-1 | E-1 | E-2 | F-1/F-2 | H-1 | H-2 | J-1/J-2 | K-1 | Other

7. Date and City where your visa was issued (Date and US Embassy/Consulate)

VISA#\_\_\_\_\_

I-94#\_\_\_\_\_

8. Expiration Date of Visa \_\_\_\_\_

9. Expiration Date of Authorized Stay (I-94)\_\_\_\_\_

10. Passport Number\_\_\_\_\_

Date your Passport was issued\_\_\_\_\_ Date your Passport expires\_\_\_\_\_

11. Are you or have you ever been lawfully admitted to the U.S. as a Permanent Resident?

YES\_\_\_\_\_ NO\_\_\_\_\_

IF YES: What is your Alien Registration Number?\_\_\_\_\_

Name as it appears on your Alien Registration Card\_\_\_\_\_

Date (Month, Day, Year) and Place (City, State) where your Alien Registration Card was issued

12. Did you Voluntarily give up your Permanent Residence in the U.S.?

YES\_\_\_\_\_ NO\_\_\_\_\_

13. Was your Permanent Residence ever revoked for being outside the U.S. for more than one year?

YES\_\_\_\_\_ NO\_\_\_\_\_

If YES, Give approximate date\_\_\_\_\_

14. Have you ever been refused admission to the U.S.?

YES\_\_\_\_\_ NO\_\_\_\_\_

If YES, Please explain\_\_\_\_\_

15. State the dates of previous Residence or Visits to the U.S. (DATE OF ENTRY, TYPE OF VISA, DATE OF DEPARTURE) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## VI. EDUCATIONAL BACKGROUND

Education in the U.S. If your degree was obtained in the U.S., attach a copy of each degree you have (i.e., if you have a Ph.D., also attach a copy of your Masters and Bachelor's)

Education Abroad. If your degree was obtained outside the U.S., attach a copy of the degree and certified translation. Also indicate the following:

Name of School	Dates of Attendance		Degree Earned
	From (month & year):	To:	(Equiv. to U.S. degree)
_____	_____	_____	Bachelor
_____	_____	_____	Masters
_____	_____	_____	Doctorate

## VII. EMPLOYMENT INFORMATION

1. Number of years work experience \_\_\_\_\_

*(List Previous Employment, Most Recent First--Give at least 5 year history, If Applicable)*

2. Job Title \_\_\_\_\_

Salary \_\_\_\_\_ Hours Per Week \_\_\_\_\_

Name of Employer \_\_\_\_\_

Type of Business \_\_\_\_\_

Address of Employer \_\_\_\_\_

From \_\_\_\_\_ 19 \_\_\_\_\_ to \_\_\_\_\_ 19 \_\_\_\_\_

Equipment, Tools, Hardware, Software, Etc. Used on Job \_\_\_\_\_

Job Duties \_\_\_\_\_

3. Job Title \_\_\_\_\_

Salary \_\_\_\_\_ Hours Per Week \_\_\_\_\_

Name of Employer \_\_\_\_\_

Type of Business \_\_\_\_\_

Address of Employer \_\_\_\_\_

From \_\_\_\_\_ 19 \_\_\_\_\_ to \_\_\_\_\_ 19 \_\_\_\_\_

Equipment, Tools, Hardware, Software, Etc. Used on Job \_\_\_\_\_

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Job Duties \_\_\_\_\_

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4. Job Title \_\_\_\_\_

Salary \_\_\_\_\_ Hours Per Week \_\_\_\_\_

Name of Employer \_\_\_\_\_

Type of Business \_\_\_\_\_

Address of Employer \_\_\_\_\_

From \_\_\_\_\_ 19\_\_\_\_ to \_\_\_\_\_ 19 \_\_\_\_\_

Equipment, Tools, Hardware, Software, Etc. Used on Job \_\_\_\_\_

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Job Duties \_\_\_\_\_

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**IF YOU HAVE HELD MORE THAN THREE JOBS, PLEASE PROVIDE THE REQUESTED INFORMATION ABOUT THESE JOBS ON A SEPARATE PIECE OF PAPER.**

***IF YOU INTEND TO APPLY FOR A EMPLOYMENT BASED VISA, PLEASE FILL OUT THE FOLLOWING (If you plan on obtaining a visa by different means, disregard this section)***

**INFORMATION ABOUT THE JOB AND EMPLOYER**

Please answer as fully and accurately as possible. If pertinent material (e.g., company brochure, job description, marketing brochure)

is available, please attach a copy.

1. Name (name of organization or individual)\_\_\_\_\_

2. Address (number & street, city, county, state, zip code)

3. Telephone number (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_ Fax # (\_\_\_\_)\_\_\_\_\_-\_\_\_\_\_

IRS Employer I.D. Number\_\_\_\_\_

4. Person who will sign the job offer

\_\_\_\_\_

\_\_\_\_\_

Name (first & last)

Title

5. General information about the employer

Date business established\_\_\_\_\_

Number of employees:\_\_\_\_\_

Annual Gross \$\_\_\_\_\_

Annual Net \$\_\_\_\_\_

A brief, nontechnical description of the nature of the business activity\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Job title\_\_\_\_\_

7. Job duties (describe in detail)\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Qualifications needed to perform the job duties\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reasons why the individual was chosen over other candidates for the position (i.e., special skills, education, knowledge about particular aspect of the work)

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Number of employees supervised: \_\_\_\_\_

8. Hours worked per week: \_\_\_\_\_ From \_\_\_\_\_ a.m. to \_\_\_\_\_ p.m.

Pay rate (specify per hour, week, month, or year): \_\_\_\_\_

Anticipated overtime hours per week: \_\_\_\_\_ Overtime rate: \_\_\_\_\_

If you receive additional benefits such as commissions or room & board, please describe:

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9. Other information about the job

Number of employees who perform the same work \_\_\_\_\_

If this is a newly created position or, how long has it existed \_\_\_\_\_

Title of your anticipated immediate supervisor \_\_\_\_\_

Address where you will work IF different than that listed above \_\_\_\_\_

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### III. MISCELLANEOUS INFORMATION

A VISA MAY NOT BE ISSUED TO PERSONS WHO ARE WITHIN SPECIFIC CATEGORIES DEFINED BY LAW AS INADMISSIBLE TO THE UNITED STATES (EXCEPT WHEN A WAIVER IS OBTAINED IN ADVANCE).

COMPLETE INFORMATION REGARDING THESE CATEGORIES AND WHETHER ANY MAY BE APPLICABLE TO YOU CAN BE OBTAINED FROM THIS OFFICE.

GENERALLY, THEY INCLUDE PERSONS:

--Afflicted with Contagious Diseases (I.E., Tuberculosis) or who have suffered serious Mental Illness:

--Arrested, Convicted for any offense or crime even though subject of a Pardon, Amnesty, or other such legal action;

--Believed to be Narcotic Addicts or Traffickers;

--Removed, Excluded or Deported from the U.S.A. at any time;

--Who have sought to obtain a Visa by Misrepresentation or Fraud;

--Who are or have been members of certain organizations including Communist Organizations and those Affiliated therewith;



--Who Ordered, Incited, Assisted, or Otherwise participated in the Persecution of any person because of Race,

Religion, National Origin, or Political Opinion under the control, Direct or Indirect, of the Nazi Government of Germany,

or of the Government of any area occupied by, or Allied with, the Nazi Government of Germany.

Do any of these appear to apply to you? \_\_\_\_\_ No \_\_\_\_\_ YES

If YES, Please attach an explanation.

PLEASE ATTACH ANY ADDITIONAL INFORMATION OR IMMIGRATION CONCERNS THAT YOU MAY WISH TO ADD TO THIS QUESTIONNAIRE ON A SEPARATE PIECE(S) OF PAPER