

Personal, Address, Phone, and Passport Information

Name provided:

Full Name in Native Language:

Other Names Used:

Sex:

Marital Status:

Date of Birth:

Place of Birth:

Nationality:

Other Nationalities:

National Identification Number:

U.S. Social Security Number:

U.S. Taxpayer ID Number:

Home Address:

City:

State/Province:

Postal Zone/Zip Code:

Country:

Same Mailing Address?

Home Phone Number:

Work Phone Number:

Work Fax Number:

Mobile/Cell Phone Number:

Email address:

Passport Number:

Passport Book Number:

Country/Authority that Issued Passport:

City Where Issued:

State/Province Where Issued:

Country Where Issued:

Issuance Date:

Expiration Date:

Have you even lost a passport or had one stolen?

Travel Information

Principal Applicant?

Purpose of Your Trip to U.S.

Purpose (1)

Specific Travel Plan?

Intended Date of Arrival:

Intended Length of Stay in U.S.:

Address where you will stay in the U.S.:

Person/Entity Paying for Your Trip:

Other Persons Traveling with You:

Are you traveling as part of a group or organization?

Persons Traveling with You:

Name (1):

Relationship to You:

Have you ever been in the U.S.?

Previous U.S. Visits in the last 5 years:

Travel Date of Arrival (1):

Length of Stay:

Do you or did you hold a U.S. Driver's License?

Have you even been issued a U.S. Visa?

Date Last Visa was Issued:

Visa Number:

Are you applying for the same type of visa?

Are you applying in the same country where the visa above is issued and is this country your principal country of residence?

Have you been ten-printed?

Has your U.S. Visa ever been lost or stolen?

Has your U.S. Visa ever been cancelled or revoked?

Have you even been refused a U.S. Visa, been refused admission to the United States, or withdrawn your application for admission at the point of entry?

U.S. Contact Information

Contact Person Name in the U.S.:

Organization Name in the U.S.:

Relationship to You:

U.S. Contact Address:

Phone Number:

Email Address:

Family Information

Father's Surnames:

Father's Given Names:

Father's Date of Birth:

Is your father in the U.S.?

Mother's Surnames:

Mother's Given Names:

Mother's Date of Birth:

Is your mother in the U.S.?

Do you have any immediate relatives, not including your parents in the U.S.?

Relative Name (1):

Relationship to you:

Status:

Spouses's Full Name:

Spouse's Date of Birth:

Spouse's Nationality:

Spouse's City of Birth:

Spouse's Country of Birth:

Spouse's Address:

Work / Education / Training Information

Primary Occupation:

Present Employer or School Name:

Address:

City:

State/Province:

Postal Zone/Zip Code:

Country:

Month Salary in Local Currency:

Briefly Describe your Duties:

Were you previously employed?

Employer Name (1):

Employer Address:

City:

State/Province:

Postal Zone/Zip Code:

Country:

Telephone Number:

Job Title:

Supervisor's Name:

Employment Date From:

Employment Date To:

Briefly describe you duties:

Have you attended any educational institutions other than elementary schools?

Name of Institution (1):

Address of Institution:

City:

State/Province:

Postal Zone/Zip Code:

Country:

Course of Study:

Date of Attendance From:

Date of Attendance To:

Name of Institution (2):

Address of Institution:

City:

State/Province:

Postal Zone/Zip Code:

Country:

Course of Study:

Date of Attendance From:

Date of Attendance To:

Name of Institution (3):

Address of Institution:

City:

State/Province:

Postal Zone/Zip Code:

Country:

Course of Study:

Date of Attendance From:

Date of Attendance To: