



Passport/Travel Document Type :
 Passport/Travel Document Number :
 Passport Book Number :
 Country/Authority that Issued Passport/Travel Document :
 - *City Where Issued* :
 - *State/Province Where Issued* :
 - *Country/Region Where Issued* :
 - *Issuance Date* :
 - *Expiration Date* :
 Have you ever lost a passport or had one stolen? : Yes / No
 If yes, please provide passport number and reason :

Travel Information

The List of Purposes of Trip to the U.S.

Purpose of Trip to the U.S. (1) :
Specify :
 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 : SELF / OTHER PERSON /
 OTHER COMPANY OR ORGANIZATION
 Surname of the Person paying for the trip :
 Given Name of the Person paying for the trip :
 Telephone Number :
 Relationship to you :
 Address :
 Company/Organization Paying for the Trip :
 Telephone Number :
 Relationship to You :



Address of Company/Organization Paying :

City :

State/Province :

Postal Zone/ZIP Code :

Country/Region :

Are there other persons traveling with you? : Yes / No

If Yes, Surname of the person :

Given name of the person :

Relationship :

Have you ever been in the U.S.? : Yes / No

Have you ever been issued a U.S. visa? : Yes / No

If Yes, Visa Number :

Date Last visa was issued :

Are you applying the same type of Visa :

Are you applying in the same country or location :

where the visa above was issued, and is this

country or location your place or principal 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 ever been refused a U.S. Visa, been refused : Yes / No

admission to the United States, or withdrawn your *If yes, please explain:*

application for admission at the port of entry?

Has anyone ever filed an immigrant petition on your : Yes / No

behalf with the United States Citizenship and *If yes, please explain:*

Immigration Services?



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.? : Yes / No
Mother's Surnames :
Mother's Given Names :
Mother's Date of Birth :
Is your mother in the U.S.? : Yes / No
Do you have any immediate relatives, not including : Yes / No
parents in the U.S.?
If yes, Surname of your relative :
Given name of your relative :
Relationship to you :
Relative's status in U.S :
Do you have any other relatives in the United States? : Yes / No

Spouse's Full Name :
Spouse's Date of Birth :
Spouse's Nationality :
Spouse's City of Birth :
Spouse's Country/Region of Birth :
Spouse's Address :



Work/Education/Training Information

Primary Occupation :

Specify Other: :

Present Employer or School Name :

Address :

:

City :

State/Province :

Postal Zone/Zip Code :

Country/Region :

Work Phone Number: :

Monthly Salary in Local Currency (if employed): :

Briefly Describe your Duties: :

Were you previously employed? : Yes / No

If yes, please provide information :

(Occupation, Company name, Address)

Provide a List of Languages You speak :

Have you traveled to any countries within the last five years? : Yes / No

Please list visited countries / regions :



**** If Yes for any questions below, please explain.**

Security and Background Information

Do you have a communicable disease of public health significance? (Communicable diseases of public significance include chancroid, gonorrhea, granuloma inguinale, infectious leprosy, lymphogranuloma venereum, infectious stage syphilis, active tuberculosis, and others diseases as determined by the Department of Health and Human Services.) Y / N

Do you have a mental or physical disorder that poses or is likely to pose a threat to the safety or welfare of yourself or others? Y / N

Are you or have you ever been a drug abuser or addict? Y / N

Have you ever been arrested or convicted for any offense or crime, even though subject of a pardon, amnesty, or other similar action? Y / N

Have you ever violated, or engaged in a conspiracy to violate, any law relating to controlled substances? Y / N

Are you coming to the United States to engage in prostitution or unlawful commercialized vice or have you been engaged in prostitution or procuring prostitutes within the past 10 years? Y / N

Have you ever been involved in, or do you seek to engage in, money laundering? Y / N

Have you ever committed or conspired to commit a human trafficking offense in the United States or outside the United States? Y / N



Are you the spouse, son, or daughter of an individual who has committed or conspired to commit a human trafficking offense in the United States or outside the United States and have you within the last five years, knowingly benefited from the trafficking activities? Y / N

Have you knowingly aided, abetted, assisted or colluded with an individual who has committed or conspired to commit a severe human trafficking offense in the United States or outside the United States? Y / N

Do you seek to engage in espionage, sabotage, export control violations, or any other illegal activity while in the United States? Y / N

Do you seek to engage in terrorist activities while in the United States or have you ever engaged in terrorist activities? Y / N

Have you ever or do you intend to provide financial assistance or other support to terrorists or terrorist organizations? Y / N

Are you a member or representative of a terrorist organization? Y / N

Have you ever ordered, incited, committed, assisted, or otherwise participated in genocide? Y / N

Have you ever committed, ordered, incited, assisted, or otherwise participated in torture? Y / N

Have you committed, ordered, incited, assisted, or otherwise participated in extrajudicial killings, political killings, or other acts of violence? Y / N

Have you ever engaged in the recruitment or the use of the child soldiers? Y / N

Have you, while serving as a government official, been responsible for or directly carried out, at any time, particularly severe violations of religious freedom? Y / N

Have you ever been directly involved in the establishment or enforcement of the population controls forcing a woman to undergo an abortion against her free choice or a man or a woman to undergo sterilization against his or her free will? Y / N

Have you ever been directly involved in the coercive transplantation of human organs or bodily tissue? Y / N

Have you ever sought to obtain or assist others to obtain a visa, entry into the United States, or any Y / N



other United States immigration benefit by fraud or willful misrepresentation or other unlawful means?

Have you ever withheld custody of a U.S. citizen child outside the United States from a person granted legal custody by a U.S. court? Y / N

Have you voted in the United States in violation of any law or regulation? Y / N

Have you ever renounced United States citizenship for the purpose of avoiding taxation? Y / N

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